

HEALTH ANNUAL STATEMENT

FOR THE YEAR ENDED DECEMBER 31, 2021

OF THE CONDITION AND AFFAIRS OF THE

Wellmark, Inc.

NAIC	Group Code 0770 0770	NAIC Company Code	e <u>88848</u> Employer's ID) Number 42-0318333
Organized under the Laws of	(Current) (Prior) Iowa	, 5	State of Domicile or Port of En	try IA
Country of Domicile		United States	of America	
Licensed as business type:		Life, Accident	& Health	
Is HMO Federally Qualified?	Yes [] No []			
Incorporated/Organized	09/19/1939		Commenced Business	10/01/1939
Statutory Home Office	1331 Grand Avenue		D	es Moines, IA, US 50309-2901
	(Street and Number)	· · · ·		Town, State, Country and Zip Code)
Main Administrative Office		1331 Grand	Avenue	
		(Street and I		
	es Moines, IA, US 50309-2901	<u>,</u>		515-376-4500
(City or	Town, State, Country and Zip Code)		(Ar	rea Code) (Telephone Number)
Mail Address	1331 Grand Avenue	,		es Moines, IA, US 50309-2901
	(Street and Number or P.O. Box	:)	(City or	Town, State, Country and Zip Code)
Primary Location of Books and	d Records	1331 Grand	Avenue	
_		(Street and I	Number)	
	es Moines, IA, US 50309-2901 Town, State, Country and Zip Code)	,		515-376-4500 rea Code) (Telephone Number)
			(/ "	
Internet Website Address		www.wellma	ark.com	
Statutory Statement Contact	Ashley Ariel A	rellano	,	515-376-6307
	(Name))		(Area Code) (Telephone Number)
	arellanoaa@wellmark.com (E-mail Address)	,		515-376-9054 (FAX Number)
		OFFICE		
—	Cory Randall Harris Scott Andrew Sundstr		EVP, CFO & Treasurer	David Seth Brown
Secretary	Scott Andrew Sundstr			
		OTHE		
	o Chickering	John Thomas Christa Danee		G. Paul Eddy Jared Blayne Landin
	h McTaggart	Naim Anwar I		Jared Diayne Landin
Melanie Creagar	n Dreher PhD, RN	DIRECTORS OF Corv Randa		Daryl Keith Henze - Chairman
	Curt Hunter	Paul Edwar		Angeline Marie Lavin
	eorge Neil	Timothy Joh	n Theriault	David Arthur Vaudt
Therese Mic	hele Vaughan			
State of	lowa Polk	SS		
County of	FOIK			
all of the herein described as statement, together with relate condition and affairs of the sai in accordance with the NAIC	sets were the absolute property of the ed exhibits, schedules and explanations d reporting entity as of the reporting per Annual Statement Instructions and Acc	e said reporting entity, s therein contained, anr eriod stated above, and counting Practices and	free and clear from any liens nexed or referred to, is a full and of its income and deductions Procedures manual except to	orting entity, and that on the reporting period stated above, or claims thereon, except as herein stated, and that this nd true statement of all the assets and liabilities and of the therefrom for the period ended, and have been completed to the extent that: (1) state law may differ; or, (2) that state to the best of their information, knowledge and belief,

respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Cory Randall Harris President & CEO

Scott Andrew Sundstrom Secretary

David Seth Brown EVP, CFO & Treasurer

Yes[X]No[]

Subscribed and sworn to before me this day of

a. Is this an original filing?

b. If no, 1. State the amendment number.....

- 2. Date filed ...
- 3. Number of pages attached.....

	A5-	SEIS			
	-	1	Current Year 2	3	Prior Year 4
				Net Admitted Assets	Net Admitted
1.	Bonds (Schedule D)	Assets 	Nonadmitted Assets	(Cols. 1 - 2) 	Assets
	Stocks (Schedule D):				
2.	2.1 Preferred stocks	2,442,304	808.147	1.634.157	1,476,170
	2.2 Common stocks			1,331,304,322	
3.	Mortgage loans on real estate (Schedule B):		, ,		
	3.1 First liens			0	0
	3.2 Other than first liens				0
4.	Real estate (Schedule A):				
	4.1 Properties occupied by the company (less \$0				
	encumbrances)				
	4.2 Properties held for the production of income (less				
	\$			0	0
	4.3 Properties held for sale (less \$0				
	encumbrances)			0	0
5.	Cash (\$161,083,484 , Schedule E - Part 1), cash equivalents				
	(\$				
	investments (\$				
6.	Contract loans, (including \$			0	0
7.	Derivatives (Schedule DB)			0	0
8.	Other invested assets (Schedule BA)				
9.	Receivables for securities		0		5, 112, 152
10.	Securities lending reinvested collateral assets (Schedule DL)			0	0
11.	Aggregate write-ins for invested assets	0	0	0	0
12.	Subtotals, cash and invested assets (Lines 1 to 11)	2,928,236,794		2,847,767,534	2,525,622,913
13.	Title plants less \$0 charged off (for Title insurers				
	only)			0	0
14.	Investment income due and accrued	7,203,271		6,991,291 .	7,262,453
15.	Premiums and considerations:				
	15.1 Uncollected premiums and agents' balances in the course of collection		0		
	15.2 Deferred premiums and agents' balances and installments booked but				
	deferred and not yet due (including \$0				
	earned but unbilled premiums)			0	0
	15.3 Accrued retrospective premiums (\$1,225,470) and				
	contracts subject to redetermination (\$17,833,900)		0		
16.	Reinsurance:				
	16.1 Amounts recoverable from reinsurers				0
	16.2 Funds held by or deposited with reinsured companies				0
	16.3 Other amounts receivable under reinsurance contracts				0
17.	Amounts receivable relating to uninsured plans				
	Current federal and foreign income tax recoverable and interest thereon				
18.2	Net deferred tax asset				
19.	Guaranty funds receivable or on deposit				
20.	Electronic data processing equipment and software	2,081,901		2,041,235 .	1,597,444
21.	Furniture and equipment, including health care delivery assets			_	_
	(\$				0
22.	Net adjustment in assets and liabilities due to foreign exchange rates				
23.	Receivables from parent, subsidiaries and affiliates				
24.	Health care (\$				
25.	Aggregate write-ins for other than invested assets				
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)				
27.	From Separate Accounts, Segregated Accounts and Protected Cell		, ,		, , ,
	Accounts			0	0
28.	Total (Lines 26 and 27)	3,523,061,766	233,788,100	3,289,273,666	2,954,103,558
	DETAILS OF WRITE-INS				
1101.					
1102.					
1103.					
1198.	Summary of remaining write-ins for Line 11 from overflow page		0	0	0
1199.	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0	0
2501.	Prepaid Premium Tax Assets			0	0
2502.	Prepaid Pension Costs			0	0
2503.	Other Prepaid Expenses			0	0
2598.	Summary of remaining write-ins for Line 25 from overflow page	2,143,507	1,620,521		
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	91,107,926	90,584,940	522.986	552,941

ASSETS

LIABILITIES, CAPITAL AND SURPLUS

 Accru Unpa Unpa Aggr Aggr Fren Pren Gene Pren Gene Curre (incl 10.2 Net of 11. Cede 12. Amo 13. Rem 14. Borro inter \$ - 15. Amo 16. Deriv 17. Paya 18. Paya 19. Fund auth rein 20. Reins corr 21. Net a 22. Liabi 23. Aggre curr 24. Total 25. Aggre 26. Com 27. Prefe 28. Gros 29. Surp 30. Aggre 	ims unpaid (less \$				
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 \$					0 0 96,599,667 241,648,129 0 _0
Hea 5. Aggr 6. Prop 7. Aggr 8. Pren 9. Gene 10.1 Curre (incl 10.2 Net of 11. Cede 12. Amo 13. Rem 14. Borro 13. Rem 14. Borro 15. Amo 16. Deriv 17. Paya 18. Paya 19. Fund auth rein 20. Reins corr 21. Net a 22. Liabi 23. Aggr curr 24. Total 25. Aggr 26. Com 27. Prefe 28. Gros 29. Surp 30. Aggr	aalth Service Act				0 0 96,599,667 241,648,129 0 _0
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 Frop Aggr Pren Gene 10.1 Currer (incl 10.2 Net of 11. Cede 12. Amo 13. Rem 14. Borror inter \$. 15. Amo 16. Deriv 17. Paya 18. Paya 19. Fund auth rein 20. Reins corr 21. Net a 22. Liabi 23. Aggra curr 24. Total 25. Aggr 26. Com 27. Prefe 28. Gros 29. Surp 30. Aggr 	perty/casualty unearned premium reserves		0 0 0 0 0	.0 .0 .0 .0 .0 .0 .0 .0 .0 .0 .0 .0 .0	
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 8. Prem 9. Gene 10.1 Currer (incl 10.2 Net of 11. Cede 12. Amo 13. Rem 14. Borror 15. Amo 16. Deriv 17. Paya 18. Paya 19. Fund auth rein 20. Reims corr 21. Net a 22. Liabi 23. Aggre curr 24. Total 25. Aggr 26. Com 27. Prefe 28. Gros 29. Surp 30. Aggre 	miums received in advance		0 	99,944,674 	
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 10.1 Currer (inclease) 10.2 Net of 11. Cedet 12. Amore 12. Amore 13. Rem 14. Borrer 14. Borrer 14. Borrer 15. Amore 15. Amore 16. Derive 17. Paya 19. Fund auther 19. Fund auther 19. Fund 20. Reins correr 21. Net at 22. Liabit 23. Aggrer currer 24. Total 25. Aggrer currer 24. Total 25. Aggrer 26. Com 27. Prefer 28. Gross 29. Surp 30. Aggres 30. Aggres	rent federal and foreign income tax payable and interest thereon cluding \$0 on realized capital gains (losses)) deferred tax liability ded reinsurance premiums payable ounts withheld or retained for the account of others nittances and items not allocated	.2,493,012 			
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 Cede Amo Rem Rem Borro inter amo 15. Amo Deriv 15. Amo 16. Deriv 17. Paya 18. Paya 19. Fund auth rein 20. Reims corr 21. Net a 22. Liabi 23. Aggre curr 24. Total 25. Aggr 26. Com 27. Prefe 28. Gros 29. Surp 30. Aggr 	ded reinsurance premiums payable ounts withheld or retained for the account of others nittances and items not allocated rowed money (including \$0 current) and erest thereon \$0 (including0 current) ounts due to parent, subsidiaries and affiliates rivatives rable for securities rable for securities lending				
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inter \$ 15. Amo 16. Deriv 17. Paya 18. Paya 19. Fund auth rein 20. Reins corr 21. Net a 22. Liabi 23. Aggre curr 24. Total 25. Aggr 26. Com 27. Prefe 28. Gros 29. Surp 30. Aggr	erest thereon \$0 (including 0 current)0 (including ounts due to parent, subsidiaries and affiliates		0		
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 16. Deriv 17. Paya 18. Paya 19. Fund auth rein 20. Reins com 21. Net a 22. Liabi 23. Aggra curr 24. Total 25. Aggra 25. Aggra 26. Com 27. Prefe 28. Gros 29. Surp 30. Aggra 	ivatives rable for securities rable for securities lending				
 Paya Paya Paya Paya Paya Paya Paya Reins corr Aggra corr Aggra corr Corr Aggra Corr Corr Corr Corr Corr Corr Corr Surp Aggra Aggra 	vable for securities	5,471,165			
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 Fund auth rein Reins corr Net a Net a Liabi Aggre curr Total Aggre Curr Total Aggre Com Com Prefe Gross Surp Aggre Aggre 	ds held under reinsurance treaties (with \$0			5,471,165	
auth rein 20. Reins com 21. Net a 22. Liabi 23. Aggra curr 24. Total 25. Aggr 26. Com 27. Prefe 28. Gros 29. Surp 30. Aggr				0	0
rein 20. Reins corr 21. Net a 22. Liabi 23. Aggra curr 24. Total 25. Aggr 26. Corr 27. Prefe 28. Gros 29. Surp 30. Aggr					
 Reinscorr corr Net a Liabi Aggra Aggra Total Total Aggr Corr Aggr Corr Aggra Total Corr Aggra Gros Surp Aggra Aggra 	thorized reinsurers, \$0 unauthorized				
21. Net a 22. Liabi 23. Aggra 24. Total 25. Aggr 26. Com 27. Prefe 28. Gros 29. Surp 30. Aggr	nsurers and \$0 certified reinsurers)			0	0
 Net a Liabi Aggrecurr Total Total Corr Gros Surp Aggr Aggrecurr Gros Surp Aggrecurr 	nsurance in unauthorized and certified (\$0)				
 Liabi Aggracurr Aggracurr Total Total Aggracurr Gros Gros Surp Aggracurr Aggracurr 	mpanies			0	0
 Aggra curr Total Total Aggra Com Com Com Prefe Gros Surp Aggra Aggra 	adjustments in assets and liabilities due to foreign exchange rates			0	0
 Aggra curr Total Total Aggra Com Com Com Prefe Gros Surp Aggra Aggra 	pility for amounts held under uninsured plans		0		
Curr 24. Total 25. Aggr 26. Com 27. Prefe 28. Gros 29. Surp 30. Aggr	regate write-ins for other liabilities (including \$2,489,995				
 24. Total 25. Aggr 26. Com 27. Prefe 28. Gros 29. Surp 30. Aggr 	rrent)	31,406,537	0	31,406,537	28.350.378
 25. Aggr 26. Com 27. Prefe 28. Gros 29. Surp 30. Aggr 	al liabilities (Lines 1 to 23)	971 500 067	0	971 500 067	928 738 915
 26. Com 27. Prefe 28. Gros 29. Surp 30. Aggr 	gregate write-ins for special surplus funds.				
27. Prefe 28. Gros 29. Surp 30. Aggr	nmon capital stock				
28. Gros 29. Surp 30. Aggr					
29. Surp 30. Aggr	ferred capital stock				
30. Aggr	ss paid in and contributed surplus				
	plus notes				
31. Unas	regate write-ins for other than special surplus funds				
	assigned funds (surplus)	XXX	XXX	2,317,773,599	2,025,364,643
32. Less	s treasury stock, at cost:				
32.1.	10 shares common (value included in Line 26				
\$.	0)				
32.2	20 shares preferred (value included in Line 27				
\$					
	al capital and surplus (Lines 25 to 31 minus Line 32)				
	al liabilities, capital and surplus (Lines 24 and 33)	XXX	XXX	3,289,273,666	2,954,103,558
	TAILS OF WRITE-INS				
	er Liabilities	20 272 818	0	20 272 818	26 //1 116
	neat Liability			2,133,719	
	nmary of remaining write-ins for Line 23 from overflow page		0		
	als (Lines 2301 thru 2303 plus 2398)(Line 23 above)	31,406,537	0	31,406,537	28,350,378
2502		XXX	XXX		
2503					
2598. Sum				0	0
2599. Tota			XXX	0	0
		XXX			
	nmary of remaining write-ins for Line 25 from overflow page als (Lines 2501 thru 2503 plus 2598)(Line 25 above)		••••		
	nmary of remaining write-ins for Line 25 from overflow page als (Lines 2501 thru 2503 plus 2598)(Line 25 above)		XXX		
	nmary of remaining write-ins for Line 25 from overflow pageals (Lines 2501 thru 2503 plus 2598)(Line 25 above)				
3098. Sum 3099. Total	nmary of remaining write-ins for Line 25 from overflow page als (Lines 2501 thru 2503 plus 2598)(Line 25 above)	XXX			

STATEMENT OF REVENUE AND EXPENSES

	STATEWENT OF REVENUE AN	Current		Prior Year
		1	2	3
		Uncovered	Total	Total
1.	Member Months	XXX		14,324,116
2. 1	Net premium income (including \$	XXX	2 553 505 904	2 542 489 708
	Change in unearned premium reserves and reserve for rate credits			
	Fee-for-service (net of \$			
	Risk revenue			
	Aggregate write-ins for other health care related revenues			
	Aggregate write-ins for other non-health revenues			
	Total revenues (Lines 2 to 7)			
	Hospital and Medical:			
	Hospital/medical benefits		1,450,487,024	1,387,634,141
	· Other professional services			
	Outside referrals			
	Emergency room and out-of-area			
	Prescription drugs		, ,	, ,
	Aggregate write-ins for other hospital and medical			0
	Incentive pool, withhold adjustments and bonus amounts			
	Subtotal (Lines 9 to 15)			
			2,212,780,421	2, 101, 873, 074
	Less: Net reinsurance recoveries			0
	Total hospital and medical (Lines 16 minus 17)			
	Non-health claims (net)			
	Claims adjustment expenses, including \$			
	General administrative expenses			
22. 1	Increase in reserves for life and accident and health contracts (including \$0 increase in reserves for life only)		0	0
	Total underwriting deductions (Lines 18 through 22)			
	Net underwriting gain or (loss) (Lines 8 minus 23)			
	Net investment income earned (Exhibit of Net Investment Income, Line 17)			
	Net realized capital gains (losses) less capital gains tax of \$			
	Net investment gains (losses) (Lines 25 plus 26)	0		
28. I	Net gain or (loss) from agents' or premium balances charged off [(amount recovered			
	\$0) (amount charged off \$0)]			0
29. /	Aggregate write-ins for other income or expenses	0		(4,921,594)
30. I	Net income or (loss) after capital gains tax and before all other federal income taxes (Lines 24 plus 27 plus 28 plus 29)	XXX	175 003 014	
31. 1	Federal and foreign income taxes incurred			40, 132,000
	Net income (loss) (Lines 30 minus 31)	XXX	143,344,014	136,322,250
			110,011,011	100,022,200
	DETAILS OF WRITE-INS	XXX		
0602.				
	Summary of remaining write-ins for Line 6 from overflow page			0
	Totals (Lines 0601 thru 0603 plus 0698)(Line 6 above)	XXX	0	0
	Commission Income		0	
0702.				
0703				
0798.	Summary of remaining write-ins for Line 7 from overflow page		0	0
	Totals (Lines 0701 thru 0703 plus 0798)(Line 7 above)	xxx	0	101,884
1401				
1402.				
1403				
1498.	Summary of remaining write-ins for Line 14 from overflow page	0	0	0
1499.	Totals (Lines 1401 thru 1403 plus 1498)(Line 14 above)	0	0	0
2901. (Other Income (Expense)	0		(4,921,594)
2902.				
2903 .				
2998.	Summary of remaining write-ins for Line 29 from overflow page	0	0	0
2999.	Totals (Lines 2901 thru 2903 plus 2998)(Line 29 above)	0	127,803	(4,921,594)

STATEMENT OF REVENUE AND EXPENSES (Continued)

		1 Current Year	2 Prior Year
1	CAPITAL AND SURPLUS ACCOUNT		
33.	Capital and surplus prior reporting year	2,025,364,643	
34.	Net income or (loss) from Line 32		
35.	Change in valuation basis of aggregate policy and claim reserves		
36.	Change in net unrealized capital gains (losses) less capital gains tax of \$14,217,000		
37.	Change in net unrealized foreign exchange capital gain or (loss)	(7,619,565)	11,416,561
38.	Change in net deferred income tax		
39.	Change in nonadmitted assets	(18,468,565)	(51,322,821)
40	Change in unauthorized and certified reinsurance	0	0
41.	Change in treasury stock	0	0
42.	Change in surplus notes	0	0
43.	Cumulative effect of changes in accounting principles		
44.	Capital Changes:		
	44.1 Paid in	0	0
	44.2 Transferred from surplus (Stock Dividend)	0	0
	44.3 Transferred to surplus.		
45.	Surplus adjustments:		
	45.1 Paid in	0	0
	45.2 Transferred to capital (Stock Dividend)		
	45.3 Transferred from capital		
46.	Dividends to stockholders		
47.	Aggregate write-ins for gains or (losses) in surplus		9,805,720
48.	Net change in capital and surplus (Lines 34 to 47)		
49.	Capital and surplus end of reporting period (Line 33 plus 48)	2,317,773,599	2,025,364,643
	DETAILS OF WRITE-INS		
4701.	Change in Pension and Other Postemployment Benefit Obligation		9,805,720
4702.			
4703.			
4798.	Summary of remaining write-ins for Line 47 from overflow page	0	0
4799.	Totals (Lines 4701 thru 4703 plus 4798)(Line 47 above)	42,307,541	9,805,720

CASH FLOW

			-
		1	2
		Current Year	Prior Year
	Cash from Operations		
1.	Premiums collected net of reinsurance	2,561,049,269	
2.	Net investment income	71,560,724	
3.	Miscellaneous income	0	101,884
4.	Total (Lines 1 through 3)	2,632,609,993	2,607,976,497
5.	Benefit and loss related payments	2,183,494,029	2, 190, 943, 169
6.	Net transfers to Separate Accounts, Segregated Accounts and Protected Cell Accounts		
7.	Commissions, expenses paid and aggregate write-ins for deductions		
8.	Dividends paid to policyholders		
9.	Federal and foreign income taxes paid (recovered) net of \$7,894,000 tax on capital gains (losses)	63, 137, 652	18,450,551
10.	Total (Lines 5 through 9)	2,556,085,429	2,586,033,993
11.	Net cash from operations (Line 4 minus Line 10)	76,524,564	21,942,504
	Cash from Investments		
12.	Proceeds from investments sold, matured or repaid:		
	12.1 Bonds		
	12.2 Stocks		
	12.3 Mortgage loans		(
	12.4 Real estate		
	12.5 Other invested assets	1,702,474	
	12.6 Net gains or (losses) on cash, cash equivalents and short-term investments		
	12.7 Miscellaneous proceeds		14,305,487
	12.8 Total investment proceeds (Lines 12.1 to 12.7)		
13.	Cost of investments acquired (long-term only):		, , ,
	13.1 Bonds		513.335.704
	13.2 Stocks		
	13.3 Mortgage loans	, , ,	
	13.4 Real estate		
	13.5 Other invested assets		
	13.6 Miscellaneous applications		4,995,682
	13.7 Total investments acquired (Lines 13.1 to 13.6)		846,983,290
14			040,000,200
14.	Net increase (decrease) in contract loans and premium notes		(142,303,577
15.	Net cash from investments (Line 12.8 minus Line 13.7 minus Line 14)	(118,915,567)	(142,303,577
40	Cash from Financing and Miscellaneous Sources		
16.	Cash provided (applied):	0	
	16.1 Surplus notes, capital notes		
	16.2 Capital and paid in surplus, less treasury stock		
	16.3 Borrowed funds		
	16.4 Net deposits on deposit-type contracts and other insurance liabilities		(
	16.5 Dividends to stockholders	0	
	16.6 Other cash provided (applied)	108,573,043	72,128,325
17.	Net cash from financing and miscellaneous sources (Lines 16.1 to 16.4 minus Line 16.5 plus Line 16.6)	108,573,043	72,128,325
	RECONCILIATION OF CASH, CASH EQUIVALENTS AND SHORT-TERM INVESTMENTS		
18.	Net change in cash, cash equivalents and short-term investments (Line 11, plus Lines 15 and 17)	66 , 182 , 040	(48,232,748
19.	Cash, cash equivalents and short-term investments:		
	19.1 Beginning of year		
	19.2 End of year (Line 18 plus Line 19.1)	226,025,950	159,843,910
	upplemental disclosures of cash flow information for non-cash transactions: 1 Noncash dividends from subsidiaries	40 000 000	102 000 000

ANALYSIS OF OPERATIONS BY LINES OF BUSINESS

		1	2	3	4	5	6 Federal Employees	7 Title	8 Title	9	10
		-	Comprehensive	Medicare	Dental	Vision	Health	XVIII	XIX		Other
		Total	(Hospital & Medical)	Supplement	Only	Only	Benefits Plan	Medicare	Medicaid	Other Health	Non-Health
1.	Net premium income		1,455,421,823			1,091,622			.0	0	0
	Change in unearned premium reserves and reserve for rate credit	(1,610,403)	(2,587,232)	(24,051)	0	0			.0	0	Q
3.	(,										
	medical expenses)	0									XXX
4.	Risk revenue	0									XXX
5.	Aggregate write-ins for other health care related revenues	0	0			0	0		.0	0	xxx
6.	Aggregate write-ins for other non-health care related revenues	0									0
7.			1,452,834,591						.0	0	0
8.	Hospital/medical benefits				0	0			.0		XXX
9.	Other professional services								.0		XXX
10.	Outside referrals					0			.0		XXX
11.	Emergency room and out-of-area					0			.0		XXX
12.	Prescription drugs					0			.0		XXX
13.	Aggregate write-ins for other hospital and medical	0	0			0	0		.0		XXX
14.	Incentive pool, withhold adjustments and bonus amounts.		17,200,362	o	0	0	0		0	0 0	XXX
15.	Subtotal (Lines 8 to 14)			373,597,323		.819,438	.269,799,349		0		XXX
16.	Net reinsurance recoveries	0			· ·	,					XXX
17.	Total medical and hospital (Lines 15 minus 16)					.819,438	269,799,349		0		XXX
18.	Non-health claims (net)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
19.	Claims adjustment expenses including										
-	\$			14,530,485	1,233,085	95,162	17.035.668		0	33,689,276	0
20.	General administrative expenses	.205,083,068	116,809,794	62,826,068	3,085,892	40,351	.6, 155, 818		0	15,672,278	492.867
21.	Increase in reserves for accident and health contracts	0									XXX
22.	Increase in reserves for life contracts	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
23.	Total underwriting deductions (Lines 17 to 22)	2,507,000,298	1,419,930,536	450,953,876		.954.951	292,990,835		0	0 310,980,723	492.867
24.	Total underwriting gain or (loss) (Line 7 minus Line 23)	44,895,203	32,904,055	(3, 152, 698)	1,840,729	136.671	(257.273)		0	0 13.916.586	(492,867)
	DETAILS OF WRITE-INS	,,=		(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,,.	,	(-		
0501.											XXX
0502.											XXX
0503.											XXX
0598.	Summary of remaining write-ins for Line 5 from overflow page	0	0	0		0	0		0		
0599.	Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)	0	0	0	0	0	0		0	0 0	XXX
0601.		0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
0602.			XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	
0603.			XXX	XXX	XXX	XXX	XXX	XXX		XXX	
0698.	Summary of remaining write-ins for Line 6 from overflow										
	page	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
0699.	Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	0	XXX	XXX	XXX	XXX	XXX	XXX	XXX	XXX	0
1301.											XXX
1302.											XXX
1303.											XXX
1398.	Summary of remaining write-ins for Line 13 from overflow page	0	0	0	0	0	0		0	0	XXX
1300	Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)								0	0 0	
1033.	Totals (Lines 1301 thin 1303 plus 1330) (Line 13 above)	0	0	U	U	U	0		0	0	~~~

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UNDERWRITING AND INVESTMENT EXHIBIT

PART 1 - PREMIUMS

	1	2	3	4
Line of Business	Direct Business	Reinsurance Assumed	Reinsurance Ceded	Net Premium Income (Cols. 1 + 2 - 3)
1. Comprehensive (hospital and medical)	1,455,421,823			1,455,421,823
2. Medicare Supplement				
3. Dental only				
4. Vision only				1,091,622
5. Federal Employees Health Benefits Plan				
6. Title XVIII - Medicare	0		-	0
7. Title XIX - Medicaid	0		-	0
8. Other health			-	
9. Health subtotal (Lines 1 through 8)		0	0	2,553,505,904
10. Life	0			0
11. Property/casualty	0			0
12. Totals (Lines 9 to 11)	2,553,505,904	0	0	2,553,505,904

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2 - CLAIMS INCURRED DURING THE YEAR

	1	2 Comprehensive	3 Medicare	4	5	6 Federal Employees Health	7 Title XVIII	8 Title XIX	9	10 Other
	Total	(Hospital & Medical)	Supplement	Dental Only	Vision Only	Benefits Plan	Medicare	Medicaid	Other Health	Non-Health
1. Payments during the year:										
1.1 Direct		1,232,137,561								
1.2 Reinsurance assumed	0									
1.3 Reinsurance ceded	0									
1.4 Net	2, 141, 135, 718	1,232,137,561					0			0
2. Paid medical incentive pools and bonuses										
3. Claim liability December 31, current year from Part 2A:										
3.1 Direct				1,761,833			0			0
3.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
3.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
3.4 Net				1,761,833			0	0		0
4. Claim reserve December 31, current year from Part 2D:										
4.1 Direct	0									
4.2 Reinsurance assumed	0									
4.3 Reinsurance ceded	0									
4.4 Net	0	0		0	0	0	0	0	0	0
5. Accrued medical incentive pools and bonuses, current										
year										
6. Net healthcare receivables (a)									(1,593,690)	
7. Amounts recoverable from reinsurers December 31, current year	0									
8. Claim liability December 31, prior year from Part 2A:										
8.1 Direct				1,783,477			0	0		0
8.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
8.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
8.4 Net							0	0		0
9. Claim reserve December 31, prior year from Part 2D:	, ,	, ,	, ,		,					
9.1 Direct	0	0	0	0	0	0	0	0	0	0
9.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
9.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
9.4 Net	0	0	0	0	0	0	0	0	0	0
10. Accrued medical incentive pools and bonuses, prior year	35,067,037	29,028,650	6,038,387	0	0	0	0	0	0	
11. Amounts recoverable from reinsurers December 31,	00,001,001	20,020,000	0,000,001		•		Ů	°	•	Ŭ
prior year	0	0	0	0	0	0	0	0	0	0
12. Incurred Benefits:	•				-	-				
12.1 Direct	2,195,580,059	1,263,367,247			.819,438		0	0		0
12.2 Reinsurance assumed		0	0	0	0	0	0	0	0	
12.3 Reinsurance ceded		n l	ñ	n	0	n	n	n l	n	
12.4 Net	2,195,580,059	1,263,367,247	373,597,323	26,377,533	819,438	269,799,349	0	0	261,619,169	0
13. Incurred medical incentive pools and bonuses	17,200,362	17,200,362	010,001,020	20,017,000	0,0,700	200,700,040	0	0	201,010,100	0
a) Excludes \$ loans or advances to provide		17,200,302	U	U	U	U	U	U	U	U

(a) Excludes \$ loans or advances to providers not yet expensed.

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2A - CLAIMS LIABILITY END OF CURRENT YEAR

-		· · · · ·						r		
	1 Total	2 Comprehensive (Hospital & Medical)	3 Medicare Supplement	4 Dental Only	5 Vision Only	6 Federal Employees Health Benefits Plan	7 Title XVIII Medicare	8 Title XIX Medicaid	9 Other Health	10 Other Non-Health
1. Reported in Process of Adjustment:										
1.1 Direct				352.367	5.297					
1.2 Reinsurance assumed	10,000,021				, 2 07	20,701,100				
1.3 Reinsurance ceded	0									
	215.566.824	138.402.871	41.619.046	352.367	5,297		0		8.435.777	0
1.4 Net		130,402,071					0	0	0,433,777	0
2. Incurred but Unreported:										
2.1 Direct										
2.2 Reinsurance assumed	0				· · · · · · · · · · · · · · · · · · ·					
2.3 Reinsurance ceded	0									
2.4 Net				1,409,466			0	0		0
3. Amounts Withheld from Paid Claims and Capitations:										
3.1 Direct	0									
3.2 Reinsurance assumed	0									
3.3 Reinsurance ceded	0									
3.4 Net	0	0	0	0	0	0	0	0	0	0
3.4 Net	0				0	0	0	0		0
4. TOTALS:										
4.1 Direct							0	0		0
4.2 Reinsurance assumed	0	0	0	0	0	0	0	0	0	0
4.3 Reinsurance ceded	0	0	0	0	0	0	0	0	0	0
4.4 Net	378,067,953	225,975,526	85,908,206	1,761,833	26,483	43,006,905	0	0	21,389,000	0

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2B - ANALYSIS OF CLAIMS UNPAID - PRIOR YEAR - NET OF REINSURANCE

	Claims Paid D	uring the Year	Claim Reserve a December 31 d		5	6
Line of Business	1 On Claims Incurred Prior to January 1 of Current Year	2 On Claims Incurred During the Year	3 On Claims Unpaid December 31 of Prior Year	4 On Claims Incurred During the Year	Claims Incurred In Prior Years (Columns 1 + 3)	Estimated Claim Reserve and Claim Liability December 31 of Prior Year
1. Comprehensive (hospital and medical)		1,063,296,025	636,383			
2. Medicare Supplement						
3. Dental Only	1,456,101		21,646	1,740,187	1,477,747	1,783,477
4. Vision Only						
5. Federal Employees Health Benefits Plan						
6. Title XVIII - Medicare					0	0
7 Title XIX - Medicaid					0	0
8. Other health				21,261,024		
9. Health subtotal (Lines 1 to 8)		1,860,851,347	1,342,823			
10. Healthcare receivables (a)						
11. Other non-health					0	0
12. Medical incentive pools and bonus amounts		10,359,734				
13. Totals (Lines 9 - 10 + 11 + 12)	293,769,421	1,785,430,418	1,341,537	386,248,781	295,110,958	254,009,736

(a) Excludes \$ loans or advances to providers not yet expensed.

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UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Comprehensive (Hospital & Medical)

	Cumulative Net Amounts Paid					
	1	2	3	4	5	
Year in Which Losses Were Incurred	2017	2018	2019	2020	2021	
1. Prior						
2. 2017		1,519,450		1,519,972	1,519,972	
3. 2018	XXX	1,201,041	1,415,207	1,415,666	1,415,666	
4. 2019		XXX		1,315,927	1,315,275	
5. 2020	XXX	XXX	XXX	1,057,547	1,254,477	
6. 2021	XXX	XXX	XXX	XXX	1,072,179	

Section B - Incurred Health Claims - Comprehensive (Hospital & Medical)

	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year							
Year in Which Losses Were Incurred	1 2017	2 2018	3 2019	4 2020	5 2021			
1. Prior	249.685	2018	2019 247.880	2020	2021			
2. 2017	1,542,348	1,520,675	1,519,972	1,519,972	1,519,972			
3. 2018		1,445,173	1,417,119	1,415,666	1,415,666			
4. 2019		XXX	1,342,459	1,317,449	1,315,275			
5. 2020		XXX	XXX	1,274,806	1,255,114			
6. 2021	XXX	XXX	XXX	XXX	1,307,427			

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Comprehensive (Hospital & Medical)

		1	2	3	4	5	6	7	8	9	10
	Years in which					Claim and Claim Adjustment Expense			Unpaid Claims	Total Claims and Claims Adjustment	
	Premiums were Earned and Claims	Decesium of Formeral	Olaina Daumant	Claim Adjustment	(Col. 3/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	Expense Payments	Percent	(Col. 2 + 3)	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1	. 2017	1,751,446	1,519,972								
2	. 2018	1,657,118	1,415,666			1,437,291				1,437,291	
3	. 2019	1,560,536	1,315,275			1,341,940					
4	. 2020	1,482,435	1,254,477			1,270,741			5		
5	. 2021	1,452,835	1,072,179	20,684	1.9	1,092,863	75.2	235,248	1,869	1,329,980	91.5

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Medicare Supplement

		Cum	ulative Net Amounts F	Paid	
	1	2	3	4	5
Year in Which Losses Were Incurred	2017	2018	2019	2020	2021
1. Prior					
2. 2017					
3. 2018					
4. 2019	xxx				
5. 2020					
6. 2021	XXX	XXX	XXX	XXX	300,240

Section B - Incurred Health Claims - Medicare Supplement

		Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuses Outstanding at End of Year						
		1	2	3	4	5		
	Year in Which Losses Were Incurred	2017	2018	2019	2020	2021		
1.	Prior							
2.	2017							
3.	2018							
4.	2019	XXX						
5.	2020	XXX						
6.	2021	XXX	XXX	XXX	XXX	386,010		

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Medicare Supplement

		1	2	3	4	5	6	7	8	9	10
	Years in which					Claim and Claim			Unpaid Claims	Total Claims and Claims Adjustment	
	Premiums were Earned and Claims			Claim Adjustment	(Col. 3/2)	Adjustment Expense Pavments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	Expense Payments	Percent	(Col. 2 + 3)	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1	2017				4.(0					.85.4
2	2018				3.9	9					
3	2019				4.	1					
4	2020					4			1		
5	2021	447,801	300,240	13,848	4.	6 314,088	70.1	85,770	682	400,540	89.4

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Dental Only

			Cumi	ulative Net Amounts P	Paid	
		1	2	3	4	5
	Year in Which Losses Were Incurred	2017	2018	2019	2020	2021
1.	Prior				1,159	
2.	2017					
3.	2018					
4.	2019					
5.	2020			XXX		
6.	2021	XXX	XXX	XXX	XXX	24,943

Section B - Incurred Health Claims - Dental Only								
	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Bonuse: Outstanding at End of Year							
	1	2	3	4	5			
Year in Which Losses Were Incurred	2017	2018	2019	2020	2021			
1. Prior								
2. 2017								
3. 2018								
4. 2019	XXX	XXX						
5. 2020	XXX							
6. 2021	XXX	XXX	XXX	XXX	26,683			

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Dental Only

	Years in which Premiums were Earned and Claims were Incurred	1 Premiums Earned	2 Claims Payment	3 Claim Adjustment Expense Payments	4 (Col. 3/2) Percent	5 Claim and Claim Adjustment Expense Payments (Col. 2 + 3)	6 (Col. 5/1) Percent	7 Claims Unpaid	8 Unpaid Claims Adjustment Expenses	9 Total Claims and Claims Adjustment Expense Incurred (Col. 5+7+8)	10 (Col. 9/1) Percent
1.	2017	26,811	.20,485		5.4	21,593	1		'		80.5
2.	2018										
3.	2019	.30,356									
4.	2020	.31,989							0		
5.	2021	32,537	24,943	1,219	4.9	26,162	80.4	1,740	14	27,916	85.8

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Vision Only

		Curr	ulative Net Amounts F	Paid	
	1	2	3	4	5
Year in Which Losses Were Incurred	2017	2018	2019	2020	2021
1. Prior					.22
2. 2017					
3. 2018	XXX				
4. 2019		XXX			
5. 2020	XXX		XXX		
6. 2021	XXX	XXX	XXX	XXX	793

|--|

	Sum of Cumulative Net Amount Paid and Claim Liability, Claim Reserve and Medical Incentive Pool and Be Outstanding at End of Year					
	1	2	3	4	5	
Year in Which Losses Were Incurred	2017	2018	2019	2020	2021	
1. Prior						
2. 2017						
3. 2018						
4. 2019		XXX				
5. 2020		XXX				
6. 2021	XXX	XXX	XXX	XXX	819	

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Vision Only

		1	2	3	4	5	6	7	8	9	10
	Years in which					Claim and Claim Adjustment Expense			Unpaid Claims	Total Claims and Claims Adjustment	
	Premiums were Earned and Claims	Decesium of Formand	Olaima Daumaat	Claim Adjustment	(Col. 3/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	Expense Payments	Percent	(Col. 2 + 3)	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1.	2017										
2.	2018										
3.	2019	1,021									
4.	2020							0	0		
5.	2021	1,092	793	95	12.0	888	81.3	26	0	914	83.7

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Federal Employees Health Benefits Plan Premium

			Cumi	ulative Net Amounts F	aid	
		1	2	3	4	5
	Year in Which Losses Were Incurred	2017	2018	2019	2020	2021
1.	Prior					
2.	2017					
3.	2018	XXX				
4.	2019	XXX				
5.	2020	XXX		XXX		
6.	2021	XXX	XXX	XXX	XXX	231,942

Section B - Incurred Health Claims - Federal Employees Health Benefits Plan Premium

		Sum of Cumulative Net A		Liability, Claim Resent tanding at End of Year		e Pool and Bonuses
		1	2	3	4	5
	Year in Which Losses Were Incurred	2017	2018	2019	2020	2021
1. 1	Prior					
2. 2	2017					
3. 2	2018					
4. 2	2019		XXX			
5. 2	2020					
6.	2021	XXX	XXX	XXX	XXX	274,530

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Federal Employees Health Benefits Plan Premium

		1	2	3	4	5	6	7	8	9	10
						Claim and Claim				Total Claims and	
	Years in which					Adjustment Expense			Unpaid Claims	Claims Adjustment	
	Premiums were Earned and Claims			Claim Adjustment	(Col. 3/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	Expense Payments	Percent	(Col. 2 + 3)	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1	. 2017					5.2222,422					
2	2. 2018					7.9246,542					
3	8. 2019					6.7					
4	. 2020					7.8			6		
5	5. 2021	292,734	231,942	16,378		7.1 248,320	84.8	42,588	658	291,566	99.6

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Other

		Cur	<u>nulative Net Amounts Pai</u>	id	
	1	2	3	4	5
Year in Which Losses Were Incurred	2017	2018	2019	2020	2021
1. Prior					
2. 2017					
3. 2018					
4. 2019	XXX				
5. 2020			XXX		
6. 2021	XXX	XXX	XXX	XXX	241,114

Section B - Incurred Health Claims - Other					
	Sum of Cumulative N	et Amount Paid and Cla	im Liability, Claim Reserve utstanding at End of Year	e and Medical Incentive	Pool and Bonuses
	1	2	3	4	5
Year in Which Losses Were Incurred	2017	2018	2019	2020	2021
1. Prior					
2. 2017					
3. 2018					
4. 2019		XXX			
5. 2020		XXX	XXX		
6. 2021	XXX	XXX	XXX	XXX	262,375

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Other

		1	2	3	4	5	6	7	8	9	10
	Years in which Premiums were Earned and Claims			Claim Adjustment	(Cal. 2/2)	Claim and Claim Adjustment Expense	(Cal 5/1)		Unpaid Claims	Total Claims and Claims Adjustment	(Cal. 0/1)
	vere Incurred	Premiums Earned	Claims Payment	Claim Adjustment Expense Payments	(Col. 3/2) Percent	Payments (Col. 2 + 3)	(Col. 5/1) Percent	Claims Unpaid	Adjustment Expenses	Expense Incurred (Col. 5+7+8)	(Col. 9/1) Percent
1.	2017	244.752			7.9	214,617	87.7	olaine onpaid	2	214.617	87.7
2.	2018	264,707	244.681	16.942	6.9					261.623	98.8
3.	2019	.287,424	.267,076		.6.2					283,507	98.6
4.	2020	.306,322	.288,076	16,802	.5.8			128			99.6
5.	2021	324,897	241,114	12,723	5.3	253,837	78.1	21,261	169	275,267	84.7

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2C - DEVELOPMENT OF PAID AND INCURRED HEALTH CLAIMS

(\$000 Omitted)

Section A - Paid Health Claims - Grand Total

		Cumu	lative Net Amounts F	Paid	
	1	2	3	4	5
Year in Which Losses Were Incurred	2017	2018	2019	2020	2021
1. Prior					
2. 2017	1,948,433		2,278,466		
3. 2018		1,929,661			
4. 2019					
5. 2020		XXX			
6. 2021	XXX	XXX	XXX	XXX	1,871,211

	Sum of Cumulative N		im Liability, Claim Reser utstanding at End of Yea		ve Pool and Bonuses
	1	2	3	4	5
Year in Which Losses Were Incurred	2017	2018	2019	2020	2021

	1	2	3	4	5
Year in Which Losses Were Incurred	2017	2018	2019	2020	2021
1. Prior			.350,349	.350,349	
2. 2017			2,278,466		2,278,466
3. 2018	XXX				
4. 2019	XXX	XXX	2,241,206		2,214,145
5. 2020	XXX	XXX			2, 157, 961
6. 2021	XXX	XXX	XXX	XXX	2,257,844

Section B - Incurred Health Claims - Grand Total

Section C - Incurred Year Health Claims and Claims Adjustment Expense Ratio - Grand Total

		1	2	3	4	5	6	7	8	9	10
	Years in which					Claim and Claim Adjustment Expense			Unpaid Claims	Total Claims and Claims Adjustment	
	Premiums were Earned and Claims			Claim Adjustment	(Col. 3/2)	Payments	(Col. 5/1)		Adjustment	Expense Incurred	(Col. 9/1)
	were Incurred	Premiums Earned	Claims Payment	Expense Payments	Percent	(Col. 2 + 3)	Percent	Claims Unpaid	Expenses	(Col. 5+7+8)	Percent
1	. 2017	2,646,943	2,278,466					0	0		
2	. 2018					2,327,015		0	0		
3	. 2019							0	0		
4	. 2020					2,225,644					
5	. 2021	2,551,896	1,871,211	64,947	3.5	1,936,158	75.9	386,633	3,392	2,326,183	91.2

UNDERWRITING AND INVESTMENT EXHIBIT

PART 2D - AGGREGATE RESERVE FOR ACCIDENT AND HEALTH CONTRACTS ONLY

	1	2	3	4	5	6	7	8	9
	Total	Comprehensive (Hospital & Medical)	Medicare Supplement	Dental Only	Vision Only	Federal Employees Health Benefits Plan	Title XVIII Medicare	Title XIX Medicaid	Other
1. Unearned premium reserves			(7,238)						
2. Additional policy reserves (a)	0								
3. Reserve for future contingent benefits	0								
4. Reserve for rate credits or experience rating refunds (including									
\$) for investment income	63,520,821								
5. Aggregate write-ins for other policy reserves	1,110,000	1,110,000	0	0	0	0	0	0	0
6. Totals (gross)			(7,238)	0	0		0	0	
7. Reinsurance ceded	0								
8. Totals (Net)(Page 3, Line 4)			(7,238)	0	0		0	0	
9. Present value of amounts not yet due on claims	0								
10. Reserve for future contingent benefits	0								
11. Aggregate write-ins for other claim reserves	0	0	0	0	0	0	0	0	0
12. Totals (gross)	0	0	0	0	0	0	0	0	0
13. Reinsurance ceded	0								
14. Totals (Net)(Page 3, Line 7)	0	0	0	0	0	0	0	0	0
DETAILS OF WRITE-INS									
0501. ACA Risk Adjustment Payable	1,110,000	1,110,000							
0502.									
0503.									
0598. Summary of remaining write-ins for Line 5 from overflow page	0	0	0	0	0	0	0	0	0
0599. Totals (Lines 0501 thru 0503 plus 0598) (Line 5 above)	1,110,000	1,110,000	0	0	0	0	0	0	0
1101.									
1102.									
1103.									
1198. Summary of remaining write-ins for Line 11 from overflow page	0	0	0	0	0	0	0	0	0
1199. Totals (Lines 1101 thru 1103 plus 1198) (Line 11 above)	0	0	0	0	0	0	0	0	0

(a) Includes \$ _____ premium deficiency reserve.

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Wellmark, Inc. UNDERWRITING AND INVESTMENT EXHIBIT

		Claim Adjustme	YSIS OF EXPENSE nt Expenses	3	4	5
		1 Cost Containment Expenses	2 Other Claim Adjustment Expenses	General Administrative Expenses	Investment Expenses	Total
1.	Rent (\$13,475,025 for occupancy of					
	own building)					15,494,19
2.	Salary, wages and other benefits					
3.	Commissions (less \$					
	ceded plus \$assumed)	0	0		0	
4.	Legal fees and expenses	0	0		0	
5.	Certifications and accreditation fees	0	0		0	10
6.	Auditing, actuarial and other consulting services	(45,212)			0	2,951,89
7.	Traveling expenses				0	
8.	Marketing and advertising		0	5,373,519	0	5,452,10
9.	Postage, express and telephone					7,961,38
10.	Printing and office supplies			1,187,860		2,276,52
11.	Occupancy, depreciation and amortization		1,173,938	(2,979,326)	6,653	(1,444,09
12.	Equipment				41	
13.	Cost or depreciation of EDP equipment and software	2,293,391	2,420,826		8,450	
14.	Outsourced services including EDP, claims, and other services	13 214 129	29 394 551	57 249 611	0	99 858 29
15.	Boards, bureaus and association fees					
15. 16.	Insurance, except on real estate					
10.	Collection and bank service charges					
	Group service and administration fees					
18.	Reimbursements by uninsured plans					
19.						
20.	Reimbursements from fiscal intermediaries Real estate expenses					
21.	Real estate expenses					
22.					4,420	
23.	Taxes, licenses and fees:					
	23.1 State and local insurance taxes23.2 State premium taxes			11.000 510		
	23.2 State premium taxes 23.3 Regulatory authority licenses and fees					
	23.4 Payroll taxes		1,713,899	4,787,523		
	23.5 Other (excluding federal income and real estate taxes)	0	0		0	
24.	Investment expenses not included elsewhere				4,622,278	4,622,27
25.	Aggregate write-ins for expenses	5,114,772	4,984,228	(6,917,727)	0	3,181,27
26.	Total expenses incurred (Lines 1 to 25)				5,312,862 (a	
27.	Less expenses unpaid December 31, current year.					
28.	Add expenses unpaid December 31, prior year					
29.	Amounts receivable relating to uninsured plans, prior year		0		0	
30.	Amounts receivable relating to uninsured plans, current year			140,287,116		140,287,1
31.	Total expenses paid (Lines 26 minus 27 plus 28 minus 29 plus 30)	20,438,587	68,965,257	235,358,182	5,367,219	330,129,24
	DETAILS OF WRITE-INS					
2501.	BlueCard Home Access Fees					
2502.	·		1,581,589	(6,917,727)		(5,335,69
2503.		 				
	Summary of remaining write-ins for Line 25 from overflow page	0	0	0	0	
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	5,114,772	4.984.228	(6,917,727)	0	3,181,27

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Wellmark, Inc. **EXHIBIT OF NET INVESTMENT INCOME**

1		1	2
		Collected During Year	Earned During Year
1.	U.S. government bonds		
1.1	Bonds exempt from U.S. tax	(a)	
1.2	Other bonds (unaffiliated)	(a)33,957,209	
1.3	Bonds of affiliates	(a)0	0
2.1	Preferred stocks (unaffiliated)	(b)	
2.11	Preferred stocks of affiliates		
2.2	Common stocks (unaffiliated)		
2.21	Common stocks of affiliates		
3.	Mortgage loans		
4.	Real estate	(d)13,475,025	
5	Contract Loans	0	0
6	Cash, cash equivalents and short-term investments	(e)460,115	
7	Derivative instruments		0
8.	Other invested assets	5,673,152	5,770,317
9.	Aggregate write-ins for investment income		
10.	Total gross investment income	113, 162, 640	
11.	Investment expenses		(g)5,305,033
12.	Investment taxes, licenses and fees, excluding federal income taxes		(g)7,829
13.	Interest expense		(h)15,484
14.	Depreciation on real estate and other invested assets		(i)6,318,136
15.	Aggregate write-ins for deductions from investment income		
16.	Total deductions (Lines 11 through 15)		
17.	Net investment income (Line 10 minus Line 16)		100,490,401
	DETAILS OF WRITE-INS		
0901.	Miscellaneous Investment Income		
0902.	Securities Lending		
0903.	-		
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	52,248	
1501.	Other Investment Expenses		
1502.			
1503.			
1598.	Summary of remaining write-ins for Line 15 from overflow page		
1599.	Totals (Lines 1501 thru 1503 plus 1598) (Line 15, above)		863,137
	· · · · · · · · · · · · · · · · · · ·		

(a) Includes \$	accrual of discount less \$14,861,499 amortization of premium and less \$
(b) Includes \$0	accrual of discount less \$0 amortization of premium and less \$
(c) Includes \$0	accrual of discount less \$
(d) Includes \$13,475,025	for company's occupancy of its own buildings; and excludes \$ interest on encumbrances.
(e) Includes \$19,908	accrual of discount less \$0 amortization of premium and less \$0 paid for accrued interest on purchases.
(f) Includes \$	accrual of discount less \$amortization of premium.
(g) Includes \$. segregated and Separate Acco	investment expenses and \$ investment taxes, licenses and fees, excluding federal income taxes, attributable to unts.
(h) Includes \$	interest on surplus notes and \$ interest on capital notes.
(i) Includes \$	depreciation on real estate and \$ depreciation on other invested assets.

EXHIBIT OF CAPITAL GAINS (LOSSES)

		1	2	3	4	5
					- · ·	
		Dealized Cain (Lasa)	Other Realized	Total Realized Capital		Change in Unrealized
		Realized Gain (Loss) On Sales or Maturity	Adjustments	Gain (Loss) (Columns 1 + 2)	Unrealized Capital Gain (Loss)	Foreign Exchange Capital Gain (Loss)
1.	U.S. Government bonds		Adjustiments0			
1.1	Bonds exempt from U.S. tax					
1.2	Other bonds (unaffiliated)	6 065 183	(171 862)		(10 300)	0
1.2	Bonds of affiliates	0,000,100			(0,005, ۳۰, ۳۰, ۵۵۵, ۳۰, ۵۵۶, ۳۰, ۳۰, ۵۵۶, ۳۰, ۳۰, ۵۵۶, ۳۰, ۳۰, ۳۰, ۳۰, ۳۰, ۳۰, ۳۰, ۳۰, ۳۰, ۳۰	0
2.1	Preferred stocks (unaffiliated)	0			(218,533)	(110,235)
2.11	Preferred stocks of affiliates			0		
2.11	Common stocks (unaffiliated)	34 107 085	(2 100 150)			(7 509 330)
2.2	Common stocks of affiliates					
3.	Mortgage loans				00,020,000	0
3. 4.	Real estate				0	0
4. 5.	Contract loans		0	0		0
5. 6.	Cash, cash equivalents and short-term investments		(119 616)			0
0. 7.	Derivative instruments				0	0
7. 8.	Other invested assets	0			5 592 1/1	0
о. 9.	Aggregate write-ins for capital gains (losses)	0	(200,000)			0
			(2.590.628)		133,105,531	(7,619,565)
10.	Total capital gains (losses) DETAILS OF WRITE-INS	39,974,233	(2,390,020)	37,303,007	155, 105, 551	(7,019,000)
0004	DETAILS OF WRITE-INS					
0901.						
0902.						
0903.						
0998.	Summary of remaining write-ins for Line 9 from overflow page	0	0	0	0	0
0999.	Totals (Lines 0901 thru 0903 plus 0998) (Line 9, above)	0	0	0	0	0

ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Wellmark, Inc. **EXHIBIT OF NON-ADMITTED ASSETS**

r		DASSETS	2	3
		ا Current Year Total Nonadmitted Assets	ے Prior Year Total Nonadmitted Assets	Change in Total Nonadmitted Assets (Col. 2 - Col. 1)
1.	Bonds (Schedule D)		0	0
2.	Stocks (Schedule D):			
	2.1 Preferred stocks			0
	2.2 Common stocks			
3.	Mortgage loans on real estate (Schedule B):			, ,
-	3.1 First liens		0	0
	3.2 Other than first liens			
4.	Real estate (Schedule A):			
	4.1 Properties occupied by the company			
	4.2 Properties held for the production of income			
	4.3 Properties held for sale		0	
5.	Cash (Schedule E - Part 1), cash equivalents (Schedule E - Part 2) and short-term investments (Schedule DA)			
6.	Contract loans		0	0
7.	Derivatives (Schedule DB)			
8.	Other invested assets (Schedule BA)			
9.	Receivables for securities			
10.	Securities lending reinvested collateral assets (Schedule DL)			
11.	Aggregate write-ins for invested assets			
12.	Subtotals, cash and invested assets (Lines 1 to 11)			
13.	Title plants (for Title insurers only)			
14.	Investment income due and accrued			
15.	Premiums and considerations:		,	
10.	15.1 Uncollected premiums and agents' balances in the course of collection	0	0	0
	15.2 Deferred premiums, agents' balances and installments booked but deferred and not yet due			
	15.3 Accrued retrospective premiums and contracts subject to redetermination			
16.	Reinsurance:			
10.	16.1 Amounts recoverable from reinsurers		0	0
	16.2 Funds held by or deposited with reinsured companies			
	16.3 Other amounts receivable under reinsurance contracts			
17	Amounts receivable relating to uninsured plans			
	Current federal and foreign income tax recoverable and interest thereon		0	
			0	0
	Net deferred tax assetGuaranty funds receivable or on deposit			0
19.			0 	
20.	Electronic data processing equipment and software			
21.	Furniture and equipment, including health care delivery assets			-
22.	Net adjustment in assets and liabilities due to foreign exchange rates		0	0
23.	Receivable from parent, subsidiaries and affiliates			(1,105,805)
24.	Health care and other amounts receivable			(1,227,504)
25.	Aggregate write-ins for other than invested assets	90,584,940		(28,299,723)
26.	Total assets excluding Separate Accounts, Segregated Accounts and Protected Cell Accounts (Lines 12 to 25)			(18,468,565)
27.	From Separate Accounts, Segregated Accounts and Protected Cell Accounts			0
28.	Total (Lines 26 and 27)	233,788,100	215,319,535	(18,468,565)
1101.	DETAILS OF WRITE-INS			
1102.				
1103.				
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0	0
1199.	Totals (Lines 1101 thru 1103 plus 1198)(Line 11 above)	0	0	0
2501.	Prepaid Premium Tax Assets			5,326,942
2502.	Prepaid Pension Costs		4,207,527	
2503.	Other Prepaid Expenses		20,597,548	1,237,824
2598.	Summary of remaining write-ins for Line 25 from overflow page	1,620,521	1,717,833	
2599.	Totals (Lines 2501 thru 2503 plus 2598)(Line 25 above)	90,584,940	62,285,217	(28,299,723)

EXHIBIT 1 - ENROLLMENT BY PRODUCT TYPE FOR HEALTH BUSINESS ONLY

		Total Members at End of						
		1	2	3	4	5	Current Year	
	Source of Enrollment	Prior Year	First Quarter	Second Quarter	Third Quarter	Current Year	Member Months	
1.	Health Maintenance Organizations							
2.	Provider Service Organizations							
3.	Preferred Provider Organizations				814,648		9,825,771	
4.	Point of Service							
5.	Indemnity Only		174,053 .		174,102		2,088,238	
6.	Aggregate write-ins for other lines of business		162,377	162,294	162,530	162,763	1,950,362	
7.	Total	1,180,058	1,161,307	1, 153, 170	1,151,280	1,150,378	13,864,371	
	DETAILS OF WRITE-INS							
0601.	Dental						1, 122,442	
0602.	Medicare Part D							
0603.	Vision					11, 105		
0698.	Summary of remaining write-ins for Line 6 from overflow page	0	0	0	0	0	0	
0699.	Totals (Lines 0601 thru 0603 plus 0698) (Line 6 above)	174,978	162,377	162,294	162,530	162,763	1,950,362	

NOTE 1 Summary of Significant Accounting Policies and Going Concern

A. Accounting Practices

The financial statements of Wellmark, Inc. (the Company) have been prepared in conformity with the accounting practices prescribed by the National Association of Insurance Commissioners (NAIC) and the State of Iowa.

The NAIC Accounting Practices and Procedures manual has been adopted as a component of prescribed or permitted practices by the State of Iowa. The Commissioner of Insurance has the right to permit specific practices that deviate from prescribed practices. The Company does not have any permitted practices.

		F/S	F/S		
	SSAP #	Page	Line #	 2021	 2020
NET INCOME (1) State basis (Page 4, Line 32, Columns 2 & 3)	xxx	xxx	XXX	\$ 143,344,014	\$ 136,322,250
(2) State Prescribed Practices that are an increase/ (decrease) from NAIC SAP:					
				\$ -	\$ -
(3) State Permitted Practices that are an increase/(decrease) from NAIC SAP:					
				\$ -	\$ -
(4) NAIC SAP (1-2-3=4)	XXX	XXX	XXX	\$ 143,344,014	\$ 136,322,250
SURPLUS					
(5) State basis (Page 3, Line 33, Columns 3 & 4)	XXX	XXX	XXX	\$ 2,317,773,599	\$ 2,025,364,643
(6) State Prescribed Practices that are an increase/ (decrease) from NAIC SAP:					
				\$ -	\$ -
(7) State Permitted Practices that are an increase/(decrease) from NAIC SAP:					
				\$ -	\$ -
(8) NAIC SAP (5-6-7=8)	XXX	XXX	XXX	\$ 2,317,773,599	\$ 2,025,364,643

B. Use of Estimates in the Preparation of the Financial Statements

The preparation of financial statements in conformity with Statutory Accounting Principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities. It also requires disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the period. Actual results could differ from those estimates.

C. Accounting Policy

Premiums on fully insured accident and health plans are billed in advance of their respective coverage periods. Receivables and income for such premiums are recorded at the effective date of the coverage period. Premiums received in advance and any unearned portion of premiums are recorded on the balance sheets as premiums received in advance and unearned premiums and reported as income when earned.

Expenses incurred in connection with acquiring new insurance business, including acquisition costs such as sales commissions, are charged to operations as incurred. Other costs, such as premium taxes and other underwriting expenses, are also charged to operations as incurred.

Real estate is carried at depreciated cost, less encumbrances. The fair value of real estate owned is determined by an external appraisal. To the extent the depreciated cost exceeds the fair value, this excess has been nonadmitted.

In addition, the Company uses the following accounting policies:

(1) Basis for Short-Term Investments

Short-term investments that are NAIC designation 1 or 2 are reported at cost adjusted for amortization of premiums and accretion of discounts using the effective interest method. Short-term investments that are NAIC designation 3 through 6 are stated at the lower of amortized cost or fair value.

(2) Basis for Bonds and Amortization Method

Bonds that are NAIC designation 1 or 2 are reported at cost adjusted for amortization of premiums and accretion of discounts using the effective interest method. Bonds that are NAIC designation 3 through 6 are stated at the lower of amortized cost or fair value. When a decline in the fair value of a bond has been determined to be other than temporary, the Company evaluates whether the decline is interest or credit related. For those credit-related declines in value that are considered to be other than temporary, the bond's carrying value is reduced and a loss is realized on the Statement of Revenues and Expenses. Surplus notes that are rated by an NAIC credit rating provider and have an NAIC designation of 1 are reported at cost, adjusted for amortization of premiums and accretion of discounts using the effective interest method.

The Company does not own any mandatory convertible securities or SVO-Identified investments identified in SSAP No. 26R.

(3) Basis for Common Stocks

Unaffiliated common stocks are reported at fair value. When a decline in the fair value of an unaffiliated common stock is considered to be other than temporary, the carrying value of the stock is reduced to fair value and a loss is realized on the Statement of Revenues and Expenses. The Company has no restricted common stock.

(4) Basis for Preferred Stocks

Preferred stock is reported based on the underlying characteristics of the security (redeemable or perpetual) and the quality rating of the security expressed as an NAIC designation.

(5) Basis for Mortgage Loans

(6) Basis for Loan-Backed Securities and Adjustment Methodology

Loan-backed securities that are NAIC designation 1 or 2 are reported at cost adjusted for amortization of premiums and accretion of discounts using the effective interest method. For all securities except for interest only securities or securities where the yield had become negative, the amortization of premiums and accretion of discounts on loan-backed securities is adjusted quarterly using current estimated future cash flows, including any new prepayment assumptions, using the retrospective adjustment method. Interest only securities and securities where the yield had become negative are valued using the prospective method. Loan-backed securities are stated at the lower of amortized cost or fair value if they are NAIC designation 3 through 6.

(7) Accounting Policies for Investments in Subsidiaries, Controlled and Affiliated Entities

Common stock of the Company's insurance subsidiaries is carried based on the underlying statutory equity of the entities. Common stock of the Company's noninsurance subsidiaries is carried based on the underlying GAAP equity of the entities. All ownership interests of the Company's non-insurance subsidiaries have been nonadmitted as of December 31, 2021 as GAAP audited financial statements are not obtained for these subsidiaries. For any non-insurance subsidiaries in a retained deficit position, the carrying value is reported at \$0.

(8) Accounting Policies for Investments in Joint Ventures, Partnerships and Limited Liability Entities

The Company has ownership interests in three affiliated joint ventures. The Company carries two of these interests based on the underlying statutory equity of the investees. The third investment is in a downstream noninsurance holding company and the Company utilizes a look through approach to carry this investment at the underlying statutory equity of the insurance entity owned by the holding company. See Note #10 L.

The Company has minor ownership interests in two limited partnerships. The Company carries these interests based on the underlying audited GAAP equity of the investees.

The Company also has minor ownership interests in limited liability companies. The Company carries these interests based on the underlying GAAP equity of the investees. If a GAAP audited statement is unavailable, the Company considers these investments non-admitted. All ownership interests in limited liability companies have been nonadmitted at December 31, 2021.

(9) Accounting Policies for Derivatives

Not applicable

(10) Anticipated Investment Income Used in Premium Deficiency Calculation

The Company anticipates investment income as a factor in the premium deficiency calculation, in accordance with Statement of Statutory Accounting Principles (SSAP) 54, Individual and Group Accident and Health Contracts.

(11) Management's Policies and Methodologies for Estimating Liabilities for Losses and Loss/Claim Adjustment Expenses

The Company provides a liability for unpaid and unreported benefits, which represents the estimated ultimate cost of benefits incurred through the balance sheet date. The liability is estimated on the basis of past experience and accumulated statistical data. Subsequent actual benefit experience may differ from the estimated liability due to variances in estimated and actual utilization of health care services, the amount of charges and other factors. These estimates are continuously reviewed and, as adjustments become necessary, such adjustments are reflected in current operations.

(12) Changes in the Capitalization Policy and Predefined Thresholds from Prior Period

The Company has not modified its capitalization policy from the prior period.

(13) Method Used to Estimate Pharmaceutical Rebate Receivables

The Company estimates pharmaceutical rebates utilizing past experience and accumulated statistical data. These estimates are continuously reviewed, and any adjustments are reflected in current operations.

D. Going Concern

Management has evaluated the Company's ability to continue as a going concern and has concluded that there are no events or circumstances that raise any doubt about the Company's ability to continue as a going concern.

NOTE 2 Accounting Changes and Corrections of Errors

Not applicable

NOTE 3 Business Combinations and Goodwill

Not applicable

NOTE 4 Discontinued Operations

Not applicable

NOTE 5 Investments

A. Mortgage Loans, including Mezzanine Real Estate Loans

Not applicable

B. Debt Restructuring

Not applicable

C. Reverse Mortgages

D. Loan-Backed Securities

(1) Description of Sources Used to Determine Prepayment Assumptions

For fixed-rate agency mortgage-backed securities, prepayment speeds are calculated utilizing Mortgage Industry Advisory Corporation (MIAC) Mortgage Industry Medians (MIMs). MIMs are derived from a semi-monthly dealer-consensus survey of long-term prepayment projections. For other mortgagebacked, loan-backed, and structured securities, prepayment assumptions are utilized from Moody's Analytics. Moody's applies a flat economic credit model and utilizes a vector of multiple monthly speeds as opposed to a single speed for more robust projections. In instances where Moody's projections are not available, data from Reuters is used, which utilizes the median prepayment speed from contributors' models.

(2) Other-Than-Temporary Impairments

There were no loan-backed securities with a current period recognized other-than-temporary impairment (OTTI) classified on the basis for the OTTI as "Intent to sell" or "Inability or lack of intent to retain the investment in the security for a period of time sufficient to recover the amortized cost basis."

(3) Recognized OTTI Securities

Loan-backed securities with a current period recognized other-than-temporary impairment, currently held by the Company, as the present value of cash flows expected to be collected is less than the amortized cost basis of the securities follows as of December 31, 2021:

1	2	3	4		5	6	7
CUSIP	Book/Adjusted Carrying Value Amortized Cost Before Current Period OTTI	Present Value of Projected Cash Flows	Recognize Other-Thai Temporar Impairmer	n- After Otl v Tem	zed Cost her-Than- porary irment	Fair Value at time of OTTI	Date of Financial Statement Where Reported
46591A-BC-8	\$ 513,502	\$ 380,883	\$ 132	,620 \$	380,883 \$	\$ 380,883	12/01/2021
08161H-AG-5	\$ 451,756	\$ 412,514	\$ 39	,242 \$	412,514 \$	\$ 412,514	12/01/2021
Total	XXX	XXX	\$ 171	.862 X	XX	XXX	XXX

(4) All impaired securities (fair value is less than cost or amortized cost) for which an other-than-temporary impairment has not been recognized in earnings as a realized loss (including securities with a recognized other-than-temporary impairment for non-interest related declines when a non-recognized interest related impairment remains):

a) The aggregate amount of unrealized losses:

 Less than 12 Months 12 Months or Longer 	\$ \$	2,040,921 1,797,445
The aggregate related fair value of securities with unrealized losses:		
1 Loss than 12 Months	¢	152 404 779

1. Less than 12 Months	\$ 153,404,778
2. 12 Months or Longer	\$ 16,468,649

(5) Information Investor Considered in Reaching Conclusion that Impairments are Not Other-Than-Temporary

The unrealized losses on the Company's investments in loan-backed securities were due to temporary changes in interest rates and market conditions. The contractual cash flows of the agency mortgage-backed investments are guaranteed by an agency of the U.S. government and the non-agency mortgage-backed and asset-backed securities include collateral which reduce the risk of loss. Based on cash flow projections, the Company believes it will recover the carrying value of these investments. Because the Company does not have the intent to sell these securities, nor is it more likely than not the Company will be required to sell these securities until a recovery of carrying value, which may be maturity, the Company does not consider these investments to be other-than-temporarily impaired.

E. Dollar Repurchase Agreements and/or Securities Lending Transactions

(1) Policy for Requiring Collateral or Other Security

The Company participates in a securities lending program through its custodian bank, Bank of New York Mellon (BNYM). On the day the loan is delivered, BNYM obtains collateral equal in amount to 102% for securities of United States issuers and 105% for securities of non-United States issuers of the market value of the securities loaned plus accrued interest. The collateralization of all loans is then reviewed daily during the term of the loan. Cash received as collateral will be held and maintained by BNYM in one of its collective investment vehicles in accordance with investment guidelines provided in the securities lending agreement. Because the Company and BNYM are not permitted by contract to sell or repledge the collateral, the collateral is not recorded on the Company's statutory Balance Sheet.

(2) Carrying Amount and Classification of Both Assets and Liabilities

Not applicable

b)

(3) Collateral Received

Not applicable

(4) Aggregate Value of the Reinvested Collateral

Not applicable

(5) Collateral Reinvestment

Not applicable

(6) Detail on Collateral Transactions Not Permitted by Contract or Custom to Sell or Repledge

The Company accepts collateral through its securities lending program with BNYM that it is not permitted by contract or custom to sell or repledge. As of December 31, 2021, no securities were on loan and no collateral had been accepted.

(7) Collateral for Securities Lending Transactions that Extend Beyond One Year from the Reporting Date

F. Repurchase Agreements Transactions Accounted for as Secured Borrowing

(1) Company Policies or Strategies for Repo Programs

The Company participates in a repurchase agreement with Bankers Trust (the Bank). The repurchase agreement is an obligation of the Bank to repay the Company the principal amount invested by the Company with interest upon demand by the Company. To secure the obligations under the repurchase agreement, the Bank grants to the Company an undivided security interest in certain United States government securities having a market value equal to at least 102% of the principal amount invested. The United States government securities comprising the collateral are at all times owned by the Bank; therefore, this collateral was not recorded on the Company's statutory Balance Sheet. Since the repurchase agreement matures upon demand, there is no asset-liability mismatch.

(2) Type of Repo Trades Used

a. Bilateral (YES/NO) b. Tri-Party (YES/NO)

FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
Yes	Yes	Yes	Yes
No	No	No	No

(3) Original (Flow) & Residual Maturity

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount				
 Open – No Maturity Overnight 2 Days to 1 Week > 1 Week to 1 Month > 1 Month to 3 Months > 3 Months to 1 Year > 1 Year 	\$ 126,349,414	\$ 56,456,318	\$ 53,855,907	\$ 56,961,408
b. Ending Balance				
 Open – No Maturity Overnight 2 Days to 1 Week > 1 Week to 1 Month > 1 Month to 3 Months > 3 Months to 1 Year > 1 Year 	\$ 16,703,381	\$ 29,756,940	\$ 9,371,826	\$ 5,881,469

(4) Fair Value Securities Sold and/or Acquired that Resulted in Default

No securities were sold and/or acquired that resulted in default.

(5) Securities "Sold" Under Repo – Secured Borrowing

The Company deposits cash into an overnight sweep account. The Bank sweeps cash out of the Company's account and invests these funds into a Repurchase Agreement. The Company has not sold any securities as part of this agreement.

(6) Securities Sold Under Repo - Secured Borrowing by NAIC Designation

The Company deposits cash into an overnight sweep account. The Bank sweeps cash out of the Company's account and invests these funds into a Repurchase Agreement. The Company has not sold any securities as part of this agreement.

(7) Collateral Received – Secured Borrowing

	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
a. Maximum Amount 1. Cash 2. Securities (FV)	\$ 128,876,411	\$ 57,585,913	\$ 54,933,737	\$ 58,101,279
b. Ending Balance 1. Cash 2. Securities (FV)	\$ 17,037,626	\$ 30,352,853	\$ 9,559,385	\$ 5,999,334

(8) Cash & Non-Cash Collateral Received - Secured Borrowing by NAIC Designation

ENDING BALANCE

	1 NONE	2 NAIC 1	١	3 NAIC 2	4 NAIC 3
a. Cash					
b. Bonds - FV	\$ -	\$ 5,999,334	\$	-	\$ -
c. LB & SS - FV					
d. Preferred Stock - FV					
e. Common Stock					
f. Mortgage Loans - FV					
g. Real Estate - FV					
h. Derivatives - FV					
i. Other Invested Assets - FV					
j. Total Collateral Assets - FV (Sum of a through i)	\$ -	\$ 5,999,334	\$	-	\$ -

ENDING BALANCE

	5 IC 4	6 NAIC 5	NA	7 IC 6	DOES	IFY AS
a. Cash						
b. Bonds - FV	\$ -	\$ -	\$	-	\$	-
c. LB & SS - FV						
d. Preferred Stock - FV						
e. Common Stock						
f. Mortgage Loans - FV						
g. Real Estate - FV						
h. Derivatives - FV						
i. Other Invested Assets - FV						
j. Total Collateral Assets - FV (Sum of a through i)	\$ -	\$ -	\$	-	\$	-

(9) Allocation of Aggregate Collateral by Remaining Contractual Maturity

- a. Overnight and Continuous
- b. 30 Days or Less
- c. 31 to 90 Days
- d. > 90 Days

(10) Allocation of Aggregate Collateral Reinvested by Remaining Contractual Maturity

The Bank holds the collateral for the benefit of the Company during the term of the repurchase agreement. The Company does not have any authority to reinvest the collateral.

FAIR VALUE

\$

5,999,334

(11) Liability to Return Collateral - Secured Borrowing (Total)

The Bank holds the collateral for the benefit of the Company during the term of the repurchase agreement. The Bank retains all rights of ownership in the collateral unless or until a default under the repurchase agreement. As a result, no liability has been recognized on the Company's Balance Sheet.

G. Reverse Repurchase Agreements Transactions Accounted for as Secured Borrowing

Not applicable

H. Repurchase Agreements Transactions Accounted for as a Sale

Not applicable

I. Reverse Repurchase Agreements Transactions Accounted for as a Sale

Not applicable

J. Real Estate

Not applicable

K. Low Income Housing tax Credits (LIHTC)

- L. Restricted Assets
 - 1. Restricted Assets (Including Pledged)

	(A	1 otal Gross Admitted & Non-		2 Total Gross Admitted &		3		4 Total		5 Total	6 Gross (Admitted & Non- admitted)	7 Admitted
		admitted) Restricted		Non- admitted)				Current Year		Current Year	Restricted to	Restricted to
		from	l	Restricted		Increase/		Non-		Admitted	Total	Total
		Current		from Prior		Decrease)		admitted		Restricted	Assets	Admitted
Restricted Asset Category a. Subject to contractual obligation for which		Year		Year	(1 minus 2)		Restricted	(1 minus 4)	(a)	Assets (b)
liability is not shown	\$	-	\$	_	\$	-	\$	-	\$	-	0.000%	0.000%
b. Collateral held under security lending	Ť		Ŷ		Ť		Ť		Ť		0.00070	0100070
agreements	\$	-	\$	-	\$	-	\$	-	\$	-	0.000%	0.000%
c. Subject to repurchase agreements	\$	5,881,469	\$	7,382,063	\$(1,500,594)	\$	-	\$	5,881,469	0.167%	0.179%
d. Subject to reverse repurchase agreements	\$	-	\$	-	\$	-	\$	-	\$	-	0.000%	0.000%
e. Subject to dollar repurchase agreements	\$	-	\$	-	\$	-	\$	-	\$	-	0.000%	0.000%
f. Subject to dollar reverse repurchase	<u>_</u>		•		<u>^</u>		_		•		0.0000/	0.0000/
agreements	\$	-	\$	-	\$	-	\$	-	\$	-	0.000%	0.000%
g. Placed under option contracts h. Letter stock or securities restricted as to sale	\$	-	\$	-	\$	-	\$	-	\$	-	0.000%	0.000%
 excluding FHLB capital stock 	\$	-	\$	-	\$	-	\$	-	\$	-	0.000%	0.000%
i. FHLB capital stock	\$	3,803,400	\$	3,511,500	\$	291,900	\$	-	\$	3,803,400	0.108%	0.116%
j. On deposit with states	\$	-	\$	-	\$	-	\$	-	\$	-	0.000%	0.000%
k. On deposit with other regulatory bodies	\$	-	\$	-	\$	-	\$	-	\$	-	0.000%	0.000%
I. Pledged collateral to FHLB (including assets												
backing funding agreements)	\$	-	\$	-	\$	-	\$	-	\$	-	0.000%	0.000%
m. Pledged as collateral not captured in other categories	¢	-	¢	_	¢	_	¢	_	¢	_	0.000%	0.000%
n. Other restricted assets	Ψ ¢	-	Ψ \$	-	φ ¢	-	ψ ¢	-	Ψ \$	-	0.000%	0.000%
o. Total Restricted Assets	\$	9,684,869	Ψ \$	10,893,563	φ \$1	1,208,694)	\$	-	φ \$	9,684,869	0.275%	0.294%

(a) Column 1 divided by Asset Page, Column 1, Line 28(b) Column 5 divided by Asset Page, Column 3, Line 28

2. Detail of Assets Pledged as Collateral Not Captured in Other Categories (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

Not applicable

3. Detail of Other Restricted Assets (Contracts That Share Similar Characteristics, Such as Reinsurance and Derivatives, Are Reported in the Aggregate)

Not applicable

4. Collateral Received and Reflected as Assets Within the Reporting Entity's Financial Statements

Not applicable

M. Working Capital Finance Investments

Not applicable

N. Offsetting and Netting of Assets and Liabilities

Not applicable

O. 5GI Securities

Not applicable

P. Short Sales

Not applicable

Q. Prepayment Penalty and Acceleration Fees

 General Account

 1. Number of CUSIPs
 2

 2. Aggregate Amount of Investment Income
 \$ 94,746

R. Reporting Entity's Share of Cash Pool by Asset Type

Not applicable

NOTE 6 Joint Ventures, Partnerships and Limited Liability Companies

A. Investments in Joint Ventures, Partnerships and Limited Liability Companies that Exceed 10% of Ownership

In February 2021, the Company entered into a joint venture agreement to form Wellmark Advantage Holdings, LLC. See Note 10.

As of December 31, 2021, the Company has no investments in Joint Ventures, Partnerships or Limited Liability Companies that exceed 10% of its admitted assets.

B. Investments in Impaired Joint Ventures, Partnerships and Limited Liability Companies

The Company did not recognize any impairment write down for its investments in Joint Ventures, Partnerships or Limited Liability Companies during 2021 or 2020.

NOTE 7 Investment Income

A. The Basis, by Category of Investment Income, for Excluding (nonadmitting) any Investment Income Due and Accrued

All investment income due and accrued relating to the Company's minor ownership interests in limited liability companies has been nonadmitted, on the basis that the related ownership interests in limited liability companies have been nonadmitted.

B. The Total Amount Excluded

The total amount excluded at December 31, 2021 was \$211,980.

NOTE 8 Derivative Instruments

NOTE 9 Income Taxes

A. Deferred Tax Assets/(Liabilities)

1. Components of Net Deferred Tax Asset/(Liability)

		2021			2020			Change	
	(1)	(2)	(3) (Col. 1 + 2)	(4)	(5)	(6) (Col. 4 + 5)	(7) (Col. 1 - 4)	(8) (Col. 2 - 5)	(9) (Col. 7 + 8)
	Ordinary	Capital	Total	Ordinary	Capital	Total	Ordinary	Capital	Total
(a) Gross deferred tax assets	\$ 69,229,000	\$ 13,097,000	\$ 82,326,000	\$ 67,508,000	\$ 11,975,000	\$ 79,483,000	\$ 1,721,000	\$ 1,122,000	\$ 2,843,000
 (b) Statutory valuation allowance adjustment (c) Adjusted gross deferred tax assets 			\$-	\$-	\$-	\$-	\$-	\$-	\$-
(1a - 1b)	\$ 69,229,000	\$ 13,097,000	\$ 82,326,000	\$ 67,508,000	\$ 11,975,000	\$ 79,483,000	\$ 1,721,000	\$ 1,122,000	\$ 2,843,000
(d) Deferred tax assets nonadmitted (e) Subtotal net admitted deferred tax asset (1c -			\$-	\$-	\$-	\$-	\$-	\$-	\$-
1d)	\$ 69,229,000	\$ 13,097,000	\$ 82,326,000	\$ 67,508,000	\$ 11,975,000	\$ 79,483,000	\$ 1,721,000	\$ 1,122,000	\$ 2,843,000
(f) Deferred tax liabilities (g) Net admitted deferred tax assets/(net deferred	\$ 744,000	\$ 54,592,000	\$ 55,336,000	\$ 612,000	\$ 40,375,000	\$ 40,987,000	\$ 132,000	\$ 14,217,000	\$ 14,349,000
tax liability) (1e - 1f)	\$ 68.485.000	\$ (41.495.000)	\$ 26.990.000	\$ 66.896.000	\$ (28,400,000)	\$ 38.496.000	\$ 1.589.000	\$ (13.095.000)	\$ (11.506.000)

2. Admission Calculation Components SSAP No. 101

		2021			2020		Change			
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2)	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5)	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5)	(9) (Col. 7 + 8)	
	Ordinary	Capital	Total	Ordinary	Capitai	Total	Ordinary	Capital	Total	
Admission Calculation Components SSAP No. 101										
(a) Federal income taxes paid in prior years recoverable through loss carrybacks	\$ 35,032,000	\$ 1,550,000	\$ 36,582,000	\$ 39,925,000	\$ 1,531,000	\$ 41,456,000	\$ (4,893,000)	\$ 19,000	\$ (4,874,000)	
(b) Adjusted gross deferred tax assets expected to be realized (excluding the amount of deferred tax assets from 2(a) above) after application of the threshold limitation. (The Lesser of 2(b)1 add 2(b)2 below)	\$ 844,000	\$-	\$ 844,000	\$ 7,047,000	¢	\$ 7,047,000	\$ (6,203,000)	¢	\$ (6,203,000)	
1. Adjusted gross deferred tax assets expected to be realized following the balance sheet date.	\$ 844,000	s -	\$ 844,000	\$ 7,047,000 \$ 7,047,000		\$ 7,047,000	\$ (6,203,000) \$ (6,203,000)	-	\$ (6,203,000) \$ (6,203,000)	
 Adjusted gross deferred tax assets allowed per limitation threshold. Adjusted gross deferred tax assets (excluding the amount of deferred tax 	xxx	XXX	\$343,311,000	xxx	XXX	\$297,791,000	xxx	XXX	\$ 45,520,000	
assets from 2(a) and 2(b) above) offset by gross deferred tax liabilities.	\$ 33,353,000	\$ 11,547,000	\$ 44,900,000	\$ 20,536,000	\$ 10,444,000	\$ 30,980,000	\$ 12,817,000	\$ 1,103,000	\$ 13,920,000	
(d) Deferred tax assets admitted as the result of application of SSAP No. 101. Total (2(a) + 2(b) + 2(c))	\$ 69.229.000	\$ 13.097.000	\$ 82.326.000	\$ 67.508.000	\$ 11.975.000	\$ 79.483.000	\$ 1.721.000	\$ 1.122.000	\$ 2.843.000	

3. Other Admissibility Criteria

a. Ratio percentage used to determine recovery period and threshold limitation amount.
b. Amount of adjusted capital and surplus used to determine recovery period and threshold limitation in 2(b)2 above.

 2021	 2020
1087.733%	1101.095%
\$ 2,290,783,599	\$ 1,986,868,643

4. Impact of Tax Planning Strategies

a. Determination of adjusted gross deferred tax assets and net admitted deferred tax assets, by tax character as a percentage.

	20	21	20	20	Cha	inge
	(1)	(2)	(3)	(4)	(5)	(6)
	Ordinary	Capital	Ordinary	Capital	(Col. 1 - 3) Ordinary	(Col. 2 - 4) Capital
1. Adjusted gross DTAs amount from Note 9A1 (c)	\$ 69,229,000	\$ 13,097,000	\$ 67,508,000	\$ 11,975,000	\$ 1,721,000	\$ 1,122,000
 Percentage of adjusted gross DTAs by tax character attributable to the impact of tax planning strategies 	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%
3. Net admitted adjusted gross DTAs amount from Note 9A1(e)	\$ 69,229,000	\$ 13,097,000	\$ 67,508,000	\$ 11,975,000	\$ 1,721,000	\$ 1,122,000
 Percentage of net admitted adjusted gross DTAs by tax character admitted because of the impact of tax planning 						
strategies	0.000%	0.000%	0.000%	0.000%	0.000%	0.000%

b. Does the company's tax-planning strategies include the use of reinsurance?

Yes [] No [X]

B. Deferred Tax Liabilities Not Recognized

None

C. Current and Deferred Income Taxes

		(1)	1	(2)		(3) (Col. 1 - 2)
Current Income Tax		2021		2020		Change
(a) Federal	\$	31,659,000	\$	40,132,000	\$	(8,473,000)
(b) Foreign	\$	-	\$	-	\$	-
(c) Subtotal	\$	31,659,000	\$	40,132,000	\$	(8,473,000)
(d) Federal income tax on net capital gains	\$	7,894,000	\$	6,042,000	\$	1,852,000
(e) Utilization of capital loss carry-forwards	\$	-	\$	-	\$	-
(f) Other	\$	-	\$	-	\$	-
(g) Federal and foreign income taxes incurred	\$	39,553,000	\$	46,174,000	\$	(6,621,000)
Deferred Tax Assets						
(a) Ordinary:						
(1) Discounting of unpaid losses	\$	1,024,000	\$	1,958,000	\$	(934,000)
(2) Unearned premium reserve	\$	-	\$	-	\$	-
(3) Policyholder reserves	\$ \$	-	\$	-	\$	-
(4) Investments(5) Deferred acquisition costs	э \$	-	\$ \$	-	\$ \$	-
(6) Policyholder dividends accrual	\$	-	φ \$	-	φ \$	-
(7) Fixed assets	\$	- 239,000	φ \$	- 248,000	φ \$	- (9,000)
(8) Compensation and benefits accrual	\$	17,325,000	Ψ \$	17,960,000	\$	(635,000)
(9) Pension accrual	\$		φ \$		φ \$	(000,000)
(10) Receivables - nonadmitted	\$	10,777,000	Ψ \$	12,240,000	\$	(1,463,000)
(11) Net operating loss carry-forward	\$		\$		\$	- (. ,
(12) Tax credit carry-forward	\$	-	\$	-	\$	-
(13) Other (including items <5% of total ordinary tax assets)	\$	39,864,000	\$	35,102,000	\$	4,762,000
Other (items listed individually >5% of total ordinary tax assets):						, ,
Intangible assets at transition date	\$	1,852,000	\$	1,962,000	\$	(110,000)
Prepaid assets - nonadmitted	\$	7,750,000	\$	9,352,000	\$	(1,602,000)
Invested assets - nonadmitted	\$	6,686,000	\$	8,634,000	\$	(1,948,000)
Nondeductible legal expenses	\$	4,233,000	\$	5,452,000	\$	(1,219,000)
Capitalized provider incentives	\$	8,777,000	\$	9,320,000	\$	(543,000)
Joint venture cost capitalization	\$	509,000	\$	-	\$	509,000
59(e) research cost capitalization	\$	9,659,000	\$	-	\$	9,659,000
Other - nonadmitted	\$	340,000	\$	361,000	\$	(21,000)
(99) Subtotal	\$	69,229,000	\$	67,508,000	\$	1,721,000
ە) Statutory valuation allowance adjustment	\$	-	\$	-	\$	-
c) Nonadmitted	\$	-	\$	-	\$	-
d) Admitted ordinary deferred tax assets (2a99 - 2b - 2c)	\$	69,229,000	\$	67,508,000	\$	1,721,000
(e) Capital:						
(1) Investments	\$	7,277,000	\$	5,225,000	\$	2,052,000
(2) Net capital loss carry-forward	\$	-	\$	-	\$	-
(3) Real estate	\$	5,820,000	\$	6,750,000	\$	(930,000)
(4) Other (including items <5% of total ordinary tax assets)	\$	-	\$	-	\$	-
(99) Subtotal	\$ \$	13,097,000	\$	11,975,000	\$	1,122,000
(f) Statutory valuation allowance adjustment		-	\$	-	\$	-
(g) Nonadmitted (h) Admitted capital deferred tax assets (2e99 - 2f - 2g)	\$ \$	-	\$	-	\$ \$	-
(i) Admitted deferred tax assets (2d + 2h)	э \$	13,097,000 82,326,000	\$ \$	11,975,000 79,483,000	э \$	1,122,000 2,843,000
Deferred Tax Liabilities						
(a) Ordinary:						
(1) Investments	\$	264,000	\$	342,000	\$	(78,000)
(2) Fixed assets	\$	480,000	\$	270,000	\$	210,000
(3) Deferred and uncollected premium	\$	-	\$		\$	
(4) Policyholder reserves	\$	-	\$	-	\$	-
(5) Other (including items <5% of total ordinary tax liabilities)	\$	-	\$	-	\$	-
(99) Subtotal	\$	744,000	\$	612,000	\$	132,000
(b) Capital:	·	,	•	,	·	- ,
(1) Investments	\$	54,592,000	\$	40,375,000	\$	14,217,000
(2) Real estate	\$	-	\$	-	\$	-
(3) Other (including items <5% of total capital tax liabilities)	\$	-	\$	-	\$	-
(99) Subtotal	\$	54,592,000	\$	40,375,000	\$	14,217,000
(c) Deferred tax liabilities (3a99 + 3b99)	\$	55,336,000	\$	40,987,000	\$	14,349,000
Net Deferred Tax Assets/Liabilities (2i - 3c)	\$	26,990,000	\$	38,496,000	\$	(11,506,000)

5. The change in net deferred income taxes is comprised of the following (this analysis is exclusive of nonadmitted assets as the change in nonadmitted assets is reported separately from the change in net deferred income taxes in unassigned surplus):

		2021			2020			Change			
	(1) Ordinary	(2) Capital	(3) (Col. 1 + 2) Total	(4) Ordinary	(5) Capital	(6) (Col. 4 + 5) Total	(7) (Col. 1 - 4) Ordinary	(8) (Col. 2 - 5) Capital	(9) (Col. 7 + 8) Total		
Total deferred tax assets			\$ 82,326,000						\$ 2,843,000		
Total deferred tax liabilities	\$ (744,000)	\$ (54,592,000)	\$ (55,336,000)	\$ (612,000)	\$ (40,375,000)	\$ (40,987,000)	\$ (132,000)	\$ (14,217,000)	\$ (14,349,000)		
Net deferred tax asset (liability)	\$ 68,485,000	\$ (41,495,000)	\$ 26,990,000	\$ 66,896,000	\$ (28,400,000)	\$ 38,496,000	\$ 1,589,000	\$ (13,095,000)	\$ (11,506,000)		
Tax effect of unrealized gains Tax effect of SSAP 92/SSAP 102									\$ 14,217,000		
Change in net deferred income tax									\$ 11,246,000 \$ 13,957,000		

D. Reconciliation of Federal Income Tax Rate to Actual Effective Rate

Among the more significant book to tax adjustments were the following:

	12/31/2021
Provision computed at statutory rate	\$ 38,408,000
Change in nonadmitted assets	\$ (960,000)
Tax exempt interest deduction, net	\$ (425,000
100% dividend received from affiliate	\$ (9,030,000
Dividends received deduction, net	\$ (805,000
Nondeductible lobbying expenses	\$ 68,000
§162(m)(6) limitation	\$ 2,847,000
Other permanent differences	\$ 222,000
Credits generated in current year	\$ (2,474,000
Adjustment of prior year's tax	\$ (2,255,000
Other	\$ -
Total	\$ 25,596,000
Federal and foreign income taxes incurred	\$ 31,659,000
Realized capital gains (losses) tax	\$ 7,894,000
Change in net deferred income taxes	\$ (13,957,000
Total statutory income taxes	\$ 25,596,000

E. Operating Loss and Tax Credit Carryforwards and Protective Tax Deposits

1. At December 31, 2021, the Company did not have any unused operating loss carryforwards available to offset against future taxable income.

2. The following are income taxes in the current and prior years that will be available for recoupment in the event of future net losses:

	Year		Amounts			
2021		:	\$	29,876,000		
2020		:	\$	56,324,000		
2019		:	\$	937,000		
Total			\$	87.137.000		

3. The Company did not have any protective tax deposits under Section 6603 of the Internal Revenue Code.

F. Consolidated Federal Income Tax Return

1 The Company's federal income tax return is consolidated with the following entities:

Wellmark of South Dakota, Inc. Wellmark Health Plan of Iowa, Inc. First Administrators, Inc. Midwest Benefit Consultants, Inc. Wellmark Holdings, Inc.

2 The manner in which the Board of Directors sets forth for allocating the consolidated federal income tax:

The method of allocation between the companies is subject to a written agreement, approved by the Board of Directors and the Iowa Insurance Division. Allocation is based upon separate return calculations with current credit for net losses.

At December 31, 2021, the Company's tax related balance due from subsidiaries was \$22,178,520.

G. Federal and Foreign Income Tax Loss Contingencies

At December 31, 2021, it is not reasonably possible to determine the Company's amount of tax loss contingencies that will significantly increase or decrease within twelve months of the reporting date.

H. Repatriation Transition Tax (RTT)

Not applicable

I. Alternative Minimum Tax Credit

The Company recognized no Alternative Minimum Tax credit as a current year recoverable or as a deferred tax asset.

NOTE 10 Information Concerning Parent, Subsidiaries, Affiliates and Other Related Parties

A. Nature of the Relationship Involved

The Company and Wellmark Health Plan of Iowa, Inc. (WHPI), a wholly owned subsidiary, have a management agreement whereby WHPI agrees to pay the Company for costs related to services outlined in the agreement. These costs are computed on a monthly basis. For 2021 and 2020, these costs were \$121,452,832 and \$102,013,916, respectively. The Company and WHPI also have an intercompany tax sharing arrangement (See Note 9). For 2021 and 2020, the tax related balance due from WHPI under this tax sharing arrangement was \$11,766,429 and \$17,094,320, respectively.

The Company and Wellmark of South Dakota, Inc. (WSD), a wholly owned subsidiary, have an intercorporate service agreement whereby WSD agrees to pay the Company for costs related to services outlined in the agreement. These costs are computed on a monthly basis. For 2021 and 2020, these costs were \$79,521,660 and \$77,164,789, respectively. The Company and WSD also have an intercompany tax sharing arrangement (See Note 9). For 2021 and 2020, the tax related balance due from WSD under this tax sharing arrangement was \$9,894,234 and \$14,586,800, respectively.

The Company received dividends of \$40,000,000 and \$53,000,000 from WSD in 2021 and 2020, respectively. The Company also received a dividend of \$49,000,000 from WHPI in 2020. The dividends reduced the inter-company payable to WSD and WHPI and were recorded in net investment income.

The Company and Wellmark Value Health Plan of Iowa, Inc. (WVHP), a partially owned affiliated joint venture, have a management agreement whereby WVHP agrees to pay the Company for costs related to services outlined in the agreement. These costs are computed on a monthly basis. For 2021 and 2020, these costs were \$2,023,522 and \$2,669,727, respectively.

The Company received cash dividends of \$3,000,000 from WVHP in both 2021 and 2020. The dividends are recorded in net investment income.

In February 2021, the Company entered into a joint venture agreement to establish a newly formed entity, Wellmark Advantage Holdings, LLC. The Company holds a 49% ownership interest in this joint venture. The Company contributed capital totaling \$22,834,000 to Wellmark Advantage Holdings, LLC in 2021. Wellmark Advantage Holdings, LLC owns 100% of the capital stock of Wellmark Advantage Health Plan, Inc. (WAHP). WAHP is an insurance entity domiciled in Iowa and licensed to sell products in Iowa and South Dakota.

B. Description of Transactions

See Note 10 A

C. Transactions with Related Parties Who Are Not Reported on Schedule Y

Not applicable

D. Amounts Due From or To Related Parties

At December 31, 2021, the Company reported \$68,462,453 as amounts due to subsidiaries and affiliates and \$42,185,240 as admitted amounts due from subsidiaries and affiliates. At December 31, 2020, the Company reported \$11,886,984 as amounts due to subsidiaries and affiliates and \$17,588,563 as admitted amounts due from subsidiaries and affiliates. The terms of the agreements require these amounts to be settled within 30 days.

E. Material Management or Service Contracts and Cost-Sharing Arrangements

The Company has an intercorporate services and investment and management agreement with some of its subsidiaries and affiliates to provide certain management and administrative services.

F. Guarantees or Undertakings

See Note 14

G. Nature of the Control Relationship

Not applicable

H. Amount Deducted from the Value of Upstream Intermediate Entity or Ultimate Parent Owned

Not applicable

I. Investments in SCA that Exceed 10% of Admitted Assets

In 2021, the Company had no investments in SCA entities that exceeded 10% of the Company's admitted assets. The Company owns a 100% interest in WSD, whose carrying value exceeded 10% of the admitted assets of the Company as of December 31, 2020. The Company carries WSD at its statutory equity, which was \$294,344,444 as of December 31, 2020. At December 31, 2020, WSD's statutory assets and liabilities were \$518,206,493 and \$223,862,049, respectively. Statutory net income for WSD was \$41,200,328 for the year ended December 31, 2020.

J. Investments in Impaired SCAs

Not applicable

K. Investment in Foreign Insurance Subsidiary

Not applicable

L. Investment in Downstream Noninsurance Holding Company

The Company utilizes the look-through approach in valuing its investment in Wellmark Advantage Holdings, LLC (WAH) at \$13,363,385. WAH's financial statements are not audited and the Company has limited the value of its investment in WAH to the audited statutory equity of Wellmark Advantage Health Plan, Inc., a wholly owned insurance subsidiary of WAH. The Company considers all liabilities, commitments, contingencies, guarantees, or obligations of WAH in the determination of the carrying value of its investment in WAH.

- M. All SCA Investments
 - (1) Balance Sheet Value (Admitted and Nonadmitted) All SCAs (Except 8bi Entities)

SCA Entity	Percentage of SCA Ownership		Gross Amount		Admitted Amount	٦	lonadmitted Amount
a. SSAP No. 97 8a Entities		\$		\$		\$	
Total SSAP No. 97 8a Entities	XXX	э \$	-	э \$	-	э \$	-
b. SSAP No. 97 8b(ii) Entities							
		\$	-	\$	-	\$	-
Total SSAP No. 97 8b(ii) Entities	XXX	\$	-	\$	-	\$	-
c. SSAP No. 97 8b(iii) Entities							
Wellmark Holdings, Inc.	100.0%	\$	-	\$	-	\$	-
First Administrators, Inc.	100.0%	\$	3,548,726	\$	-	\$	3,548,726
Midwest Benefit Consultants, Inc.	100.0%	\$	5,463,734	\$	-	\$	5,463,734
Total SSAP No. 97 8b(iii) Entities	XXX	\$	9,012,460	\$	-	\$	9,012,460
d. SSAP No. 97 8b(iv) Entities							
		\$	-	\$	-	\$	-
Total SSAP No. 97 8b(iv) Entities	XXX	\$	-	\$	-	\$	-
e. Total SSAP No. 97 8b Entities (except 8b(i) entities) (b+c+d)	XXX	\$	9,012,460	\$	-	\$	9,012,460
f. Aggregate Total (a+ e)	XXX	\$	9,012,460	\$	-	\$	9,012,460

(2) NAIC Filing Response Information

SCA Entity (Should be same entities as shown in M(1) above.)	Type of NAIC Filing	Date of Filing to the NAIC	NAIC Valuation Amount	NAIC Response Received Yes/No	NAIC Disallowed Entities Valuation Method, Resub- mission Required Yes/No	Code **
a. SSAP No. 97 8a Entities			•			
Total SSAP No. 97 8a Entities	XXX	XXX	\$- \$-	XXX	XXX	XXX
b. SSAP No. 97 8b(ii) Entities			¢			
Total SSAP No. 97 8b(ii) Entities	XXX	XXX	\$- \$-	XXX	XXX	XXX
c. SSAP No. 97 8b(iii) Entities						
Wellmark Holdings, Inc.	S1	10/25/2016	\$-	Yes	No	
First Administrators, Inc.	S1	10/25/2016	\$-	Yes	No	
Midwest Benefit Consultants, Inc.	S1	10/25/2016	\$ -	Yes	No	
Total SSAP No. 97 8b(iii) Entities	XXX	XXX	\$	XXX	XXX	XXX
d. SSAP No. 97 8b(iv) Entities						
			\$ -			
Total SSAP No. 97 8b(iv) Entities	XXX	XXX	\$ -	XXX	XXX	XXX
e. Total SSAP No. 97 8b Entities (except 8b(i) entities) (b+c+d)	xxx	XXX	\$-	xxx	xxx	xxx
f. Aggregate Total (a+e)	XXX	XXX	\$ -	XXX	XXX	XXX

* S1 - Sub-1, S2 - Sub-2 or RDF - Resubmission of Disallowed Filing

** I - Immaterial or M - Material

The Company is exempt from a Sub-2 filing for its SSAP 97 8b(iii) subsidiaries because they are fully nonadmitted.

N. Investment in Insurance SCAs

Not applicable

O. SCA or SSAP 48 Entity Loss Tracking

1	2	3	4	5 Guaranteed Obligation / Commit-	6
	Reporting		Reporting	ment	Amount of the
	Entity's	Accumulated	Entity's	for	Recognized
	Share of	Share of	Share of	Financial	Guarantee
	Net Income	Net Income	Equity, Including	Support	Under
Entity	(Loss)	(Losses)	Negative Equity	(Yes/No)	SSAP No. 5R
Wellmark Holdings, Inc.	\$ (687,515)	\$ (2,059,205)	\$ (2,002,172)	No	\$-

The losses in Wellmark Holdings, Inc. have not impacted other investments.

NOTE 11 Debt

A. Debt Including Capital Notes

Not applicable

- B. FHLB (Federal Home Loan Bank) Agreements
 - (1) Nature of the Agreement

The Company became a member of the Federal Home Loan Bank (FHLB) of Des Moines during 2020. The Company has determined the estimated current maximum borrowing capacity as approximately \$115,000,000. The Company calculated this amount in accordance with FHLB Des Moines credit and collateral guidelines. When borrowings occur, it is anticipated that the Company's strategy will be to utilize these funds to meet daily liquidity needs. As of year end, the Company has no outstanding advances with FHLB Des Moines.

(2) FHLB Capital Stock

a.

_	Total
\$	3,803,400
\$	3,803,400
\$	115,000,000
	\$

- 2. Prior Year-end
 - (a) Membership Stock Class A(b) Membership Stock Class B(c) Activity Stock(d) Excess Stock(e) Aggregate Total (a+b+c+d)(f) Actual or Estimated Borrowing Capacity as Determined by the
Insurer100,000,000

11B(2)a1(f) should be equal to or greater than 11B(4)a1(d) 11B(2)a2(f) should be equal to or greater than 11B(4)a2(d)

b. Membership Stock (Class A and B) Eligible and Not Eligible for Redemption

		1		2	Eligible for Redemption										
				Not Eligible for Redemption		3 Less Than 6 Months		4 Months to		5	6				
	Current Year Total (2+3+4+5+6)							Less Than 1 Year		1 to Less Than 3 Years		5 Years			
Membership Stock															
1. Class A	\$	-													
2. Class B	\$	3,803,400	\$	3,803,400	\$	-	\$	-	\$	-	\$	-			

11B(2)b1 Current Year Total (Column 1) should equal 11B(2)a1(a) Total (Column 1) 11B(2)b2 Current Year Total (Column 1) should equal 11B(2)a1(b) Total (Column 1)

(3) Collateral Pledged to FHLB

No amounts were pledged during the reporting period and no amounts were pledged as of December 31, 2021.

(4) Borrowing from FHLB

No amounts were borrowed during the reporting period and no amounts were outstanding as of December 31, 2021.

NOTE 12 Retirement Plans, Deferred Compensation, Postemployment Benefits and Compensated Absences and Other Postretirement Benefit Plans

A. Defined Benefit Plan

The Company sponsors a pension program (the program) that contains both a defined benefit and cash balance plan available to eligible employees depending on the date of hire. The defined benefit pension plan benefits are based on years of service and the employee's highest five consecutive years' compensation in the last ten years of service. Under the cash balance plan, employees earn annual credits based on a percentage of salary that are accumulated in an account that earns interest annually. Pension plan assets were held in the Non-Contributory Retirement Program for Certain Employees of Wellmark, Inc. Trust (Trust) with Prudential Bank & Trust, F.S.B. as the trustee of the program as of December 31, 2021. Prudential Retirement Insurance and Annuity Company (collectively with Prudential Bank & Trust, F.S.B. as Prudential) performed administration and recordkeeping services for the program through December 31, 2021

Effective January 1, 2022, the program was amended to close participation to new entrants after December 31, 2021 and to provide for the cessation of all benefit accruals under all plan formulas under the program effective December 31, 2029. Additionally, as of January 1, 2022, the administration and recordkeeping services for the program were transferred to Principal Life Insurance Company (collectively with Principal Financial Group as Principal). Pension plan assets held in the Trust were transferred to Principal Trust Company as the trustee of the program effective January 1, 2022.

The funding policy of the program is to contribute amounts sufficient to meet the minimum funding requirements set forth in the Employee Retirement Income Security Act of 1974 and the Pension Protection Act of 1996, plus additional amounts as determined to be appropriate from time to time. No voluntary contributions were made to the pension plan in 2021 or 2020. There are no current plans for the Company to make voluntary contributions to the pension plan in 2022.

The Company also sponsors a postretirement health care benefit plan. The plan has two separate benefit calculations available to employees depending on the date of hire. One plan contributes toward the cost of health care premiums based on years of service and is available to employees who retire from the Company who have at least ten years of service and have attained age 65 while in service to the Company. This plan also includes a life insurance benefit based on the employee's annual salary at retirement and is available to employees who retire from the Company who have at least five years of service and have attained age 55 while in service to the Company. The second plan option allows employees to accumulate annual credits in an account that earns interest annually and can be used to pay for health care premiums when the employee becomes Medicare eligible. The Company has not funded either the postretirement health care or life insurance plans but intends to meet the obligations of the plans through general assets of the Company.

Effective January 1, 2022, the postretirement health care benefit plan was amended to close the plan to additional participants and to freeze accruals of annual credits under the plan for all participants under age 62.

A summary of assets, obligations and assumptions of the Pension and Other Postretirement Benefit Plans are as follows at December 31, 2021 and 2020:

(1)	Change ir	n Benefit	Obligation
-----	-----------	-----------	------------

	Overfunded					Underfunded				
		2021	2020			2021		2020		
a. Pension Benefits										
1. Benefit obligation at beginning of year	\$	368,665,068	\$	351,283,253	\$	-	\$	-		
2. Service cost	\$	11,731,751	\$	10,979,041	\$	-	\$	-		
3. Interest cost	\$	9,857,848	\$	11,428,434	\$	-	\$	-		
4. Contribution by plan participants										
5. Actuarial gain (loss)	\$	(3,792,470)	\$	26,734,285	\$	-	\$	-		
6. Foreign currency exchange rate changes										
7. Benefits paid	\$	(3,461,188)	\$	(2,766,423)	\$	-	\$	-		
8. Plan amendments										
9. Business combinations, divestitures, curtailments, settlements										
and special termination benefits	\$	(45,726,443)	\$	(28,993,522)	\$	-	\$	-		
10. Benefit obligation at end of year	\$	337,274,566	\$	368,665,068	\$	-	\$	-		

			Overfu			Underfunded			
		2	021		2020		2021		2020
b. Po	ostretirement Benefits								
1.	Benefit obligation at beginning of year	\$	-	\$	-	\$	40,939,305	\$	38,619,671
2.	Service cost	\$	-	\$	-	\$	1,698,294	\$	1,470,794
3.	Interest cost	\$	-	\$	-	\$	1,012,649	\$	1,159,529
4.	Contribution by plan participants								
5.	Actuarial gain (loss)	\$	-	\$	-	\$	(1,598,951)	\$	932,281
6.	Foreign currency exchange rate changes								
7.	Benefits paid	\$	-	\$	-	\$	(1,335,362)	\$	(1,242,970)
8.	Plan amendments								
	Business combinations, divestitures, curtailments, settlements								
an	d special termination benefits	\$	-			\$	(1,784,033)		
10	. Benefit obligation at end of year	\$	-	\$	-	\$	38,931,902	\$	40,939,305
			Over	unded			Under	funde	ed
		2	2021		2020	2021		2020	
c. Sp	ecial or Contractual Benefits Per SSAP No. 11								
1.	Benefit obligation at beginning of year	\$	-	\$	-	\$	12,761,767	\$	9,776,675
2.	Service cost	\$	-	\$	-	\$	20,546,616	\$	18,958,191
3.	Interest cost								
4.	Contribution by plan participants								
	Actuarial gain (loss)								
6.	Foreign currency exchange rate changes								
7.	Benefits paid	\$	-	\$	-	\$	(19,724,495)	\$	(15,973,099
	Plan amendments								、 , , ,
	Business combinations, divestitures, curtailments, settlements d special termination benefits								
10	Benefit obligation at end of year	\$	-	\$	-	\$	13,583,888	\$	12,761,767
10	•	\$		-	- \$	- \$ -	- \$ - \$	- \$ - \$ 13,583,888	- \$ - \$ 13,583,888 \$
c	Donaion			Dootroti	iro	mont	mont	ment Special or C	mont Special or Control

	Pen Ben		Postret Ben			Special or Contractual Benefits Per SSAP No. 11				
	2021	2020	2021		2020		2021		2020	
a. Fair value of plan assets at beginning of year	\$ 372,872,595	\$ 362,459,542	\$	-	\$	-	\$	-	\$	-
 b. Actual return on plan assets c. Foreign currency exchange rate changes 	\$ 39,507,327	\$ 42,172,998	\$	-	\$	-	\$	-	\$	-
 d. Reporting entity contribution e. Plan participants' contributions 										
f. Benefits paid g. Business combinations, divestitures	\$ (3,461,188)	\$ (2,766,423)	\$	-	\$	-	\$	-	\$	-
and settlements h. Fair value of plan assets at end of	\$ (32,474,840)	\$ (28,993,522)	\$	-	\$	-	\$	-	\$	-
year	\$ 376,443,894	\$ 372,872,595	\$	-	\$	-	\$	-	\$	-

		Pension Benefits				Postretirement Benefits				
	2021			2020		2021	2020			
a. Components										
1. Prepaid benefit costs	\$	97,397,758	\$	112,426,332	\$	-	\$	-		
2. Overfunded plan assets	\$	(58,228,430)	\$	(108,218,805)	\$	-	\$	-		
Accrued benefit costs	\$	-	\$	-	\$	40,063,819	\$	38,508,055		
4. Liability for pension benefits	\$	-	\$	-	\$	(1,131,917)	\$	2,431,250		
b. Assets and liabilities recognized										
1. Assets (nonadmitted)	\$	39,169,328	\$	4,207,527	\$	-	\$	-		
2. Liabilities recognized	\$	-	\$	-	\$	38,931,902	\$	40,939,305		
c. Unrecognized liabilities										

(4) Components of Net Periodic Benefit Cost

	Pension Benefits				Postre Ber		Special or Contra Per SSAP				
	 2021		2020		2021		2020		2021		2020
a. Service cost	\$ 11,731,751	\$	10,979,041	\$	1,698,294	\$	1,470,794	\$	20,546,616	\$	18,958,191
b. Interest cost	\$ 9,857,848	\$	11,428,434	\$	1,012,649	\$	1,159,529	\$	-	\$	-
c. Expected return on plan assets	\$ (22,408,685)	\$	(21,697,620)	\$	-	\$	-	\$	-	\$	-
d. Transition asset or obligation											
e. Gains and losses	\$ 8,548,813	\$	10,476,159	\$	-	\$	-	\$	-	\$	-
f. Prior service cost or credit g. Gain or loss recognized due to a	\$ 79,602	\$	79,602	\$	397,663	\$	569,060	\$	-	\$	-
settlement or curtailment	\$ 7,219,245	\$	8,478,085	\$	(217,480)	\$	-	\$	-	\$	-
h. Total net periodic benefit cost	\$ 15,028,574	\$	19,743,701	\$	2,891,126	\$	3,199,383	\$	20,546,616	\$	18,958,191

(5) Amounts in Unassigned Funds (Surplus) Recognized as Components of Net Periodic Benefit Cost

		Pension	Ben	efits		Postretirem	ent Be	enefits
		2021		2020		2021	_	2020
 a. Items not yet recognized as a component of net periodic cost - prior year b. Net transition asset or obligation recognized 	\$	108,218,805	\$	120,993,744	\$	2,431,250	\$	2,068,02
c. Net prior service cost or credit arising during the period								
d. Net prior service cost or credit recognized	\$	(416,316)	\$	(79,602)	\$	(1,964,216)	\$	(569,06
e. Net gain and loss arising during the period	\$	(34,142,715)	\$	6.258.907	\$	(3,382,984)	\$	932,28
f. Net gain and loss recognized	\$	(15,431,344)	\$	(18,954,244)	\$	1,784,033	\$,
g. Items not yet recognized as a component of net periodic cost -	Ŧ	(,,,	+	(,,)	*	.,,	•	
current year	\$	58,228,430	\$	108,218,805	\$	(1,131,917)	\$	2,431,250
) Amounts in Unassigned Funds (Surplus) That Have Not Yet Been F	Recognizo	ed as Componer Pension			nefit C	Cost Postretirem	ient Be	enefits
i) Amounts in Unassigned Funds (Surplus) That Have Not Yet Been F	Recogniz	Pension		efits	nefit (Postretirem	ient Be	
	Recogniz				nefit C		ient Be	enefits 2020
a. Net transition asset or obligation		Pension	Ben	efits 2020		Postretirem 2021		2020
	Recogniz \$ \$	Pension		efits	nefit C	Postretirem	ient Be \$ \$	
a. Net transition asset or obligation b. Net prior service cost or credit c. Net recognized gains and losses	\$	Pension 2021 58,228,430	Ben \$ \$	efits 2020 416,316	\$	Postretirem 2021 65,273	\$	2020
a. Net transition asset or obligation b. Net prior service cost or credit c. Net recognized gains and losses	\$	Pension 2021 58,228,430	Ben \$ \$	efits 2020 416,316	\$	Postretirem 2021 65,273	\$	2020
 a. Net transition asset or obligation b. Net prior service cost or credit c. Net recognized gains and losses Weighted-Average Assumptions Used to Determine Net Periodic Be 	\$	Pension 2021 58,228,430	Ben \$ \$	efits 2020 416,316	\$	Postretirem 2021 65,273	\$	2020
 a. Net transition asset or obligation b. Net prior service cost or credit c. Net recognized gains and losses 7) Weighted-Average Assumptions Used to Determine Net Periodic Be Pension Benefits: a. Weighted-average discount rate 	\$	Pension 2021 58,228,430	Ben \$ \$	efits 2020 416,316	\$	Postretirem 2021 65,273 (1,197,190)	\$	2020 2,029,489 401,76
 a. Net transition asset or obligation b. Net prior service cost or credit c. Net recognized gains and losses 7) Weighted-Average Assumptions Used to Determine Net Periodic Be Pension Benefits: 	\$	Pension 2021 58,228,430	Ben \$ \$	efits 2020 416,316	\$	Postretirem 2021 65,273 (1,197,190) 2021	\$	2020 2,029,48 401,76 2020

c. Rate of compensation increase 3.50 - 8.00% 3.50 - 8.00% d. Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates) 1.50 - 3.00% 2.25 - 3.00% Weighted-Average Assumptions Used to Determine Projected Benefit Obligations as December 31 2021 2020 e. Weighted-average discount rate 3.00% 2.80% f. Rate of compensation increase 3.50 - 8.00% 3.50 - 8.00% g. Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates) 2.00 - 3.00% 1.50 - 3.00% Postretirement Benefits: 2021 2020 a. Weighted-average discount rate 2.50% 3.20% b. Expected long-term rate of return on plan assets N/A N/A c. Rate of compensation increase 3.50 - 8.00% 3 50 - 8 00% d. Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates) N/A N/A Weighted-Average Assumptions Used to Determine Projected Benefit Obligations as December 31 2021 2020 e. Weighted-average discount rate 2.80% 2.50% f. Rate of compensation increase 3.50 - 8.00% 3.50 - 8.00%

g. Interest crediting rates (for cash balance plans and other plans with promised interest crediting rates)

(8) Accumulated Benefit Obligation for Defined Benefit Pension Plans

The amount of the accumulated benefit obligation for the defined benefit pension plan was \$303,148,075 for the current year and \$316,671,724 for the prior year.

N/A

N/A

(9) Assumed Health Care Cost Trend Rate(s) For Postretirement Benefits Other than Pensions

For postretirement benefits other than pensions, for measurement purposes, 6.75% (pre-65) and 6.75% (post-65) annual rates of increase in the per capita cost of covered health care benefits were assumed for 2021. These rates grade down annually to 4.75% for 2028 and beyond.

(10) The following estimated future payments, which reflect expected future service, as appropriate, are expected to be paid in the years indicated:

	Amour	.+
a. 2022	\$ 29,991	,000,
b. 2023	\$ 27,177	,000
c. 2024	\$ 26,035	,000
d. 2025	\$ 25,358	,000
e. 2026	\$ 25,214	,000,
f. 2027 through 2031	\$ 119,698	,000
Postretirement Benefits		
	Amour	ıt
a. 2022	\$ 1,966	,000
b. 2023	\$ 2,046	,000
c. 2024	\$ 2,177	,000,
d. 2025	\$ 2,279	,000
e. 2026	\$ 2,396	,000
f. 2027 through 2031	\$ 12,646	,000

(11) Estimate of Contributions Expected to be Paid to the Plan

The Company does not have any regulatory contribution requirements for 2022. In addition, there are no current plans for the Company to make voluntary contributions to the defined benefit pension plan in 2022.

(12) Amounts and Types of Securities Included in Plan Assets

Not applicable

(13) Alternative Method Used to Amortize Prior Service Amounts or Net Gains and Losses

Not applicable

(14) Substantive Comment Used to Account for Benefit Obligation

Not applicable

(15) Cost of Providing Special or Contractual Termination Benefits Recognized

Not applicable

(16) Reasons for Significant Gains/Losses Related to Changes in Defined Benefit Obligation and any Other Significant Change in the Benefit Obligations or Plan Assets Not Otherwise Apparent

See Note 12 A narrative.

(17) Accumulated Postretirement and Pension Benefit Obligation and Fair Value of Plan Assets for Defined Postretirement and Pension Benefit Plans

The pension plan was in an overfunded status at December 31, 2021 and 2020. As required by SSAP 102, overfunded plan assets are nonadmitted. The Company has not funded either the postretirement health care or life insurance plans. The impact to surplus to recognize the unfunded status of the Other Postretirement Benefit Plans was (\$1,131,917) and \$2,431,250 at December 31, 2021 and 2020, respectively.

(18) Full Transition Surplus Impact of SSAP 102

Not applicable

B. Investment Policies and Strategies

The Company's pension plan assets are invested in the Trust. The investment program for the Trust is based on the precepts of capital market theory that are generally accepted and followed by institutional investors, who by definition are long-term oriented investors. This philosophy holds that:

- 1. Increasing risk is rewarded with compensating returns over time and therefore, prudent risk taking is justifiable for long term investors.
- Risk can be controlled through diversification of asset classes and investment approaches as well as diversification of individual securities.
 Risk is reduced by time, and over time the relative performance of different asset classes is reasonably consistent. Over the long-term, equity investments have provided and should continue to provide superior returns over other security types. Fixed-income securities can dampen volatility and provide liquidity in periods of depressed economic activity. Lengthening duration of fixed income securities may reduce surplus volatility.
- 4. The strategic or long-term allocation of assets among various asset classes is an important driver of long term returns.
- 5. Relative performance of various asset classes is unpredictable in the short-term and attempts to shift tactically between asset classes are unlikely to be rewarded.

Investments will be made for the sole interest of the participants of the pension plan participating in the Trust. Accordingly, the assets of the Trust shall be invested in accordance with these objectives:

- 1. To seek and maintain an adequate funded status with regard to current liabilities within a targeted range.
- 2. To manage overall costs of running the pension plan at levels favorable to industry benchmarks
- 3. To ensure assets are available to meet current and future benefit and expense obligations when due

C. Fair Value of Plan Assets

(1) Fair Value Measurements of Plan Assets at Reporting Date

Description for each class of plan assets	(Level 1)	(Level 2)	(Level 3)	Total
Common/collective trusts	\$ -	\$ -	\$ -	\$ -
Equity accounts	\$ -	\$ 92,989,713	\$ -	\$ 92,989,713
Fixed account	\$ -	\$ 14,144,302	\$ -	\$ 14,144,302
Pooled separate accounts	\$ -	\$ -	\$ -	\$ -
Fixed income account	\$ -	\$ 89,751,472	\$ -	\$ 89,751,472
Short-term account	\$ -	\$ 3,680,182	\$ -	\$ 3,680,182
Mutual funds	\$ -	\$ -	\$ -	\$ -
Equity funds	\$ 38,872,291	\$ -	\$ -	\$ 38,872,291
Fixed funds	\$ 9,556,591	\$ -	\$ -	\$ 9,556,591
Total Plan Assets	\$ 48,428,882	\$ 200,565,669	\$ -	\$ 248,994,551

Pension plan assets also include \$53,627,334 of hedge funds where fair value is measured at net asset value (NAV) per share as a practical expedient and \$73,822,009 of limited partnerships which are accounted for under the equity method.

(2) Valuation Technique(s) and Inputs Used to Measure Fair Value

Generally, Level 1 financial instruments consist of mutual funds that are actively traded and have quoted prices available. Mutual funds are valued at NAV of shares held based on the latest quoted market price. Financial instruments included in Level 2 consist of common/collective trusts, pooled separate accounts, and money market funds that have direct or indirect price inputs that are observable in active markets or are measured at NAV. The fair value of the Company's hedge funds are estimated using NAV as a practical expedient. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. The Trust's limited partnership investments are initially recorded at cost. The carrying amounts are then increased or decreased to reflect the Trust's share of the income or loss. Quoted market prices do not exist for the limited partnerships. It is not practicable to estimate the fair value of the Trust's limited partnership investments and, in certain instances, confidential nature of the underlying investments in the partnerships, the specialized knowledge of specific industries and transactions required, and the time lag with which information is available from the limited partnerships. The underlying net assets within each limited partnership are measured at fair value; therefore, the equity method value is considered a reasonable proxy for fair value.

The Company obtains prices and/or relevant inputs to fair value calculations from external investment managers or from the custodian of the pension assets, which uses a third party pricing service. For securities not actively traded, the investment manager and/or pricing service may use quoted market prices of comparable instruments or discounted cash flow analyses, incorporating inputs that are currently observable in the markets for similar securities. Inputs that are often used in the valuation methodologies include, but are not limited to, benchmark yields, credit spreads, default rates, prepayment conditions, and nonbinding broker quotes. Additionally, for investments that do not have quoted market prices whereby fair value is measured using NAV per share as a practical expedient, inputs used in the valuation methodologies also include redemption frequency and redemption notice periods, to give consideration to liquidity constraints, if applicable.

D. Basis Used to Determine Expected Long-Term Rate-of-Return

The basis of the overall expected long-term rate of return on assets assumption is a forward-looking approach based on the current long-term capital market outlook assumptions of the asset categories the Trust invests in and the Trust's target asset allocation.

The assumed target asset allocation for the program is as follows: 43% equity securities, 30% fixed income, 15.5% hedge funds, 10% private equity, and 1.5% cash and cash equivalents. Portfolio expectations were estimated through a combination of underlying asset assumptions including geometric returns, distributions, and correlations. Using these assumptions, the Company selected the expected return on asset assumption of 6.00% for 2021. This rate is net of both investment and other administrative expenses charged to the Trust.

E. Defined Contribution Plan

The Company also sponsors a defined contribution plan (the plan) which is qualified under Section 401(k) of the Internal Revenue Code. The plan covers substantially all employees of the Company and subsidiaries. Employees can contribute a maximum of 80% of their annual salary to the plan (up to the elective deferral limits set by the Commissioner of Internal Revenue). The Company will contribute an amount equal to 100% of the first 4% of salary contributed by the employee. The plan also provides for additional employer contributions at the discretion of the Board of Directors. Recordkeeping responsibilities for the plan are performed by Prudential.

Effective January 1, 2022, the plan was amended to provide different employer contributions to employees hired or rehired effective January 1, 2022 or after. For participants hired or rehired on or after January 1, 2022, the Company will contribute an amount equal to 100% of the first 6% of salary contributed by the employee. The Company will also make an annual contribution for these participants of 2%, 3% or 4% based on their age and years of service. To be eligible for the annual contribution, a participant is required to be an active employee on the last day of the plan year. Participants hired on or before December 31, 2021 will continue to receive a Company contribution in an amount equal to 100% of the first 4% of salary contributed by the employee. Effective January 1, 2022, recordkeeping responsibilities for the plan were transferred to Principal.

The Company's contribution for this plan was \$3,580,935 and \$3,663,653 for 2021 and 2020, respectively.

F. Multiemployer Plans

Not applicable

G. Consolidated/Holding Company Plans

The Company is the plan sponsor of a pension program and a postretirement health and life benefit program which cover substantially all employees of the consolidated group.

H. Postemployment Benefits and Compensated Absences

Not applicable

I. Impact of Medicare Modernization Act on Postretirement Benefits (INT 04-17)

The Company plans to return any subsidy received to retirees in the form of higher postretirement welfare benefits. Therefore, the effects of the subsidy are not reflected in the measurement of the accumulated postretirement benefit obligation or the net periodic benefit cost.

NOTE 13 Capital and Surplus, Dividend Restrictions and Quasi-Reorganizations

A. Number of Shares and Par or Stated Value of Each Class

Not applicable

B. Dividend Rate, Liquidation Value and Redemption Schedule of Preferred Stock Issues

Not applicable

C. Dividend Restrictions

Not applicable

D. Dates and Amounts of Dividends Paid

Not applicable

E. Profits that may be Paid as Ordinary Dividends to Stockholders

Not applicable

F. Restrictions Placed on Unassigned Funds (Surplus)

Not applicable

G. Amount of Advances to Surplus not Repaid

Not applicable

H. Amount of Stock Held for Special Purposes

Not applicable

Reasons for Changes in Balance of Special Surplus Funds from Prior Period

Not applicable

J, The Portion of Unassigned Funds (Surplus) Represented or Reduced by Unrealized Gains and Losses is:

\$ 785,186,721

K. The Reporting Entity Issued the Following Surplus Debentures or Similar Obligations

Not applicable

L. The Impact of any Restatement Due to Prior Quasi-Reorganizations

Not applicable

M. Effective Date of Quasi-Reorganization for a Period of Ten Years Following Reorganization

Not applicable

NOTE 14 Liabilities, Contingencies and Assessments

- A. Contingent Commitments
 - (1) The Company is required by licensure requirements of the Blue Cross Blue Shield Association (BCBSA) to execute parental guarantees for its licensed controlled affiliates, pursuant to which the Company guarantees to the full extent of its assets all contractual and financial obligations of WHPI, WSD, FAI, WSH and WVHP to their respective customers. The Company also is required by licensure requirements of the BCBSA to execute a parental guarantee for Wellmark Advantage Health Plan, Inc., pursuant to which the Company's ownership interest in Wellmark Advantage Health Plan, Inc., Also, the Company, as the parent of WHPI is required by the lowa Insurance Division to guarantee the obligations of WHPI to pay for services to enrollees up to \$1,100,000.

Through parental guarantees executed between the Company and its joint venture companies WSH and WVHP, the Company guarantees that WSH and WVHP are in compliance with the lowa statutory minimum for HMO capital and surplus of \$1,000,000 or the statutory minimum for risk-based capital for health organizations, whichever is greater.

(2) Detail of Other Contingent Commitments

Not applicable

(3) Guarantee Obligations

Not applicable

B. Assessments

(1) Assessments Where Amount is Known or Unknown

The Company is subject to health related assessments by the lowa Comprehensive Health Association and the lowa Individual Health Benefit Reinsurance Association for high risk insurance pools. The Company accrued a net admitted receivable of \$1,170,000 and a liability of \$8,740,000 for estimated health related assessments as of December 31, 2021.

The National Organization of Life & Health Insurance Guaranty Associations (NOLHGA) is an association consisting of the state life and health insurance guaranty organizations. State life and health insurance guaranty organizations, working with NOLHGA, provide a safety net for their state's policyholders, ensuring that they continue to receive coverage even if their insurer is declared insolvent. On March 1, 2017, the Pennsylvania Insurance Commissioner filed an order to place long-term care insurance carrier Penn Treaty Network America Insurance Company and its subsidiary American Network Insurance Company, or collectively Penn Treaty, into liquidation. The Company and other insurers are required to pay a portion of their policyholder claims through state guaranty association assessments.

The Company's guaranty fund payable is \$0 and \$3,500,000 as of December 31, 2021 and 2020 respectively. The assessment is recoverable through premium tax offsets.

(2) Assessments

Not applicable

(3) Guaranty Fund Liabilities and Assets Related to Assessments from Insolvencies for Long-Term Care Contracts

Not applicable

C. Gain Contingencies

Not applicable

D. Claims Related Extra Contractual Obligation and Bad Faith Losses Stemming from Lawsuits

Not applicable

E. Joint and Several Liabilities

Not applicable

F. All Other Contingencies

The Company contracts with an unaffiliated company for products and services. Charges to the Company, after allocation of a portion of the costs to subsidiaries and affiliates, amounted to approximately \$8,288,000 in 2021. Future minimum payments through December 31, 2032, the expiration date of this contract, total approximately \$87,409,000 for this contract.

The Company has an agreement with a vendor for services and equipment in connection with the Company's disaster recovery site. Future minimum payments through October 23, 2022, expiration date of the agreement, total approximately \$601,500. This agreement has renewal options extending to the year 2032.

The Company, along with the BCBSA and Blue Cross and/or Blue Shield licensees, or Blue Plans across the country, is a defendant in a single multi-district consolidated lawsuit In re Blue Cross Blue Shield Antitrust Litigation that is pending in the United States District Court for the Northern District of Alabama. Generally, the litigation alleges that the BCBSA and Blue Plans have engaged in activities in violation of the Sherman Act and related state laws through license agreements, best efforts rules that limit the percentage of non-Blue revenue of each plan, restrictions on acquisitions and other arrangements. The cases were brought by two putative nationwide classes of plaintiffs, health plan subscribers and providers. The Company, the BCBSA and all other Blue Cross and/or Blue Shield licensees, have reached a settlement with the health plan subscriber class plaintiffs. This settlement has been preliminarily approved by the United States District Court for the Northern District of Alabama. The court currently is supervising the final class settlement approval process. There have been several additional individual lawsuits filed by groups and members who opted out of the subscriber class. The Company has made adequate provision for its proportional share of the settlement and any damages that may result from the opt-out suits. The provider class litigation is proceeding.

In the ordinary course of business, the Company is involved in and subject to claims, contractual disputes and other uncertainties, which the Company defends vigorously. While the ultimate outcome of any other claims cannot be presently determined, in the opinion of management, adequate provision has been made for any potential losses which may result from these actions and the Company expects any liability that could result will not materially affect its financial position.

NOTE 15 Leases

- A. Lessee Operating Lease
 - (1) Lessee's Leasing Arrangements
 - a. Rental Expense

The Company leases office space, parking facilities and equipment under various noncancelable operating lease agreements that expire through June 2027. Rental expense associated with these lease arrangements was approximately \$717,000 and \$774,000 for 2021 and 2020, respectively.

b. Basis on Which Contingent Rental Payments are Determined

Not applicable

c. Existence and Terms of Renewal or Purchase Options and Escalation Clauses

Certain rental commitments have renewal options extending through the year 2033. Some of these renewals are subject to adjustments in future periods.

d. Restrictions Imposed by Lease Agreements

Not applicable

e. Identification of Lease Agreements That Have Been Terminated Early

Not applicable

- (2) Leases with Initial or Remaining Noncancelable Lease Terms in Excess of One Year
 - a. At December 31, 2021, the minimum aggregate rental commitments are as follows:

	Leases
1. 2022	\$ 685,390
2. 2023	\$ 603,662
3. 2024	\$ 147,174
4. 2025	\$ 91,704
5. 2026	\$ 91,704
6. Total	\$ 1,619,634

Operating

b. Total of Minimum Rentals to be Received in the Future Under Noncancelable Subleases

Not applicable

(3) For Sale-Leaseback Transactions

Not applicable

B. Lessor Leases

Not applicable

NOTE 16 Information About Financial Instruments With Off-Balance Sheet Risk and Financial Instruments With Concentrations of Credit Risk

Not applicable

- NOTE 17 Sale, Transfer and Servicing of Financial Assets and Extinguishments of Liabilities
- A. Transfers of Receivables Reported as Sales

Not applicable

- B. Transfer and Servicing of Financial Assets
 - (1) Description of any Loaned Securities

The Company participates in a securities lending program through its custodian bank, Bank of New York Mellon (BNYM). On the day the loan is delivered, BNYM obtains collateral equal in amount to 102% for securities of United States issuers and 105% for securities of non-United States issuers of the market value of the securities loaned plus accrued interest. The collateralization of all loans is then reviewed daily during the term of the loan. Cash received as collateral will be held and maintained by BNYM in one of its collective investment vehicles in accordance with investment guidelines provided in the securities lending agreement. Because the Company and BNYM are not permitted by contract to sell or repledge the collateral, the collateral is not recorded on the Company's statutory Balance Sheet. Prior to the close of business for the calendar year, at the request of the Company, BNYM recalls all securities that are out on loan. As of December 31, 2021, no securities were on loan.

(2) Servicing Assets and Servicing Liabilities

Not applicable

(3) When Servicing Assets and Liabilities are Measured at Fair Value

Not applicable

(4) Securitizations, Asset-Based Financing Arrangements and Similar Transfers Accounted for as Sales

Not applicable

(5) Disclosure Requirements for Transfers of Assets Accounted for as Secured Borrowing

Not applicable

(6) Transfer of Receivables with Recourse

Not applicable

(7) Securities Underlying Repurchase and Reverse Repurchase Agreements, Dollar Repurchase and Dollar Reverse Repurchase Agreements Not applicable

C. Wash Sales

Not applicable

NOTE 18 Gain or Loss to the Reporting Entity from Uninsured Plans and the Uninsured Portion of Partially Insured Plans

A. ASO Plans

Not applicable

B. ASC Plans

The gain from operations from Administrative Services Contract (ASC) uninsured plans and the uninsured portion of partially insured plans was as follows during 2021:

	ASC Uninsured Plans	Portion of Partially Insured Plans	Total ASC
a. Gross reimbursement for medical cost incurred	\$ 1,638,801,192	\$ 1,546,579,712	\$ 3,185,380,904
 b. Gross administrative fees accrued c. Other income or expenses (including interest paid to or received from 	\$ 44,569,166	\$ 92,611,086	\$ 137,180,252
plans)	\$-	\$-	\$-
d. Gross expenses incurred (claims and administrative)	\$ 1,672,122,879	\$ 1,682,876,302	\$ 3,354,999,181
e. Total net gain or loss from operations	\$ 11,247,479	\$ (43,685,504)	\$ (32,438,025)

C. Medicare or Similarly Structured Cost Based Reimbursement Contract

Reimbursements from Centers for Medicare and Medicaid Services (CMS) for the Company's participation in the Medicare Part D program for the year ended December 31, 2021 were \$48,502,311. This amount represents pharmacy benefit cost reimbursements for the Reinsurance Subsidy and Low-Income Cost Sharing Subsidy elements of the Medicare Part D program.

At December 31, 2021, the Company has a receivable of \$1,825,613 from CMS for these reimbursements and has recorded a payable of \$14,731,648 for pre-funded amounts received from CMS not applied to benefit payments.

During the year, the Company received a net amount of \$1,348,944 for prior year cost reimbursements from CMS.

NOTE 19 Direct Premium Written/Produced by Managing General Agents/Third Party Administrators

Not applicable

NOTE 20 Fair Value Measurements

A. Fair Value Measurements

(1) Fair Value Measurements at Reporting Date

Description for Each Class of Asset or Liability	(Level 1)	(Level 2)	(Level 3)	Ne	et Asset Value (NAV)	Total		
Assets at Fair Value								
Cash Equivalents	\$ -	\$ -	\$ -	\$	-	\$	-	
Exempt MM Mutual Funds	\$ 21,785,741	\$ -	\$ -	\$	-	\$	21,785,741	
Sweep Account	\$ -	\$ 5,881,469	\$ -	\$	-	\$	5,881,469	
Bonds	\$ -	\$ -	\$ -	\$	-	\$	-	
Industrial & Miscellaneous	\$ -	\$ 19,420,766	\$ -	\$	-	\$	19,420,766	
Bank Loans	\$ -	\$ 14,909,305	\$ -	\$	-	\$	14,909,305	
Preferred Stock	\$ -	\$ -	\$ -	\$	-	\$	-	
Industrial & Miscellaneous	\$ 1,634,157	\$ -	\$ -	\$	-	\$	1,634,157	
Common Stock	\$ -	\$ -	\$ -	\$	-	\$	-	
Industrial & Miscellaneous	\$ 596,184,487	\$ -	\$ 3,113,694	\$	-	\$	599,298,181	
Mutual Funds	\$ 151,188,385	\$ -	\$ -	\$	-	\$	151,188,385	
Total Assets at Fair Value/NAV	\$ 770,792,770	\$ 40,211,540	\$ 3,113,694	\$	-	\$	814,118,004	

(2) Fair Value Measurements in Level 3 of the Fair Value Hierarchy

Description	1	Beginning Balance at)1/01/2021	Transfers into Level 3	Transfers out of Level 3	Total gains and (losses) included in Net Income	Total gains and (losses) included in Surplus	Purchases	lssuances	Sales	Settlement s	Ending Balance at 12/31/2021
a. Assets											
Common Stock - Industrial & Miscellaneous	\$	3,087,831	\$ -	\$ -	\$ -	\$ 25,863	s -	¢ -	\$ -	\$ -	\$ 3,113,694
	Ψ	3,007,001	ψ -	Ψ -	ψ -			Ψ -	Ψ -	Ψ -	ψ 0,110,094
Total Assets	\$	3,087,831	\$-	\$-	\$-	\$ 25,863	\$-	\$-	\$-	\$-	\$ 3,113,694

(3) Policies when Transfers Between Levels are Recognized

The Company recognizes transfers between fair value hierarchy levels at the end of the reporting period.

(4) Description of Valuation Techniques and Inputs Used in Fair Value Measurement

Bonds, structured securities, and surplus notes (other invested assets) are reported within Level 2 of the fair value hierarchy; all of these securities have direct or indirect price inputs that are observable in active markets. Fair values of these fixed income instruments are based on quoted market prices where available. The Company obtains at least one price from a third party pricing service or its custodian, which also uses a pricing service. In most instances, the Company obtains more than one price and evaluates between the pricing sources for any outliers or stale prices. Assuming prices are not stale and are reasonable between sources, the Company follows a pre-established hierarchy to conclude on which pricing source to utilize.

The pricing services normally derive security prices through recently reported trades for identical or similar securities, making adjustments through the reporting date based upon available observable market information. For securities not actively traded, the pricing service may use quoted market prices of comparable instruments or discounted cash flow analyses, incorporating inputs that are currently observable in the market for similar securities. Inputs that are often used in the valuation methodologies include, but are not limited to, benchmark yields, credit spreads, default rates, prepayment conditions, and nonbinding broker quotes.

Common stock reported within Level 2 of the fair value hierarchy is FHLB Class B Membership stock. This stock is non-redeemable and is reported at par, which is considered a proxy for fair value.

The Level 3 financial instrument is a privately held stock whose fair value is determined based on the unaudited GAAP equity per outstanding common share on a quarterly basis and on the audited GAAP equity per outstanding common share at calendar year end.

(5) Fair Value Disclosures for Derivative Assets and Liabilities

Not applicable

B. Fair Value Reporting under SSAP 100 and Other Accounting Pronouncements

Statutory guidance requires the disclosure of fair values for certain other financial instruments for which it is practicable to estimate fair value, whether or not such values are recognized in the statements of assets, liabilities, capital and surplus. The carrying amounts for cash, receivable for securities, accrued investment income, premium receivables, other receivables, amounts due to/from affiliates, unearned premiums, accounts payable and accrued expenses, and certain other liabilities approximate fair value because of the short-term nature of these items.

C. Aggregate Fair Value For All Financial Instruments and the Level Within the Fair Value Hierarchy in Which the Fair Value Measurements in Their Entirety Fall

Type of Financial Instrument	Aggregate Fair Value	Admitted Assets	(Level 1)	(Level 2)	(Level 3)	Net Asset Value (NAV)	Not Practicable (Carrying Value)
Cash Equivalents	\$ 27,667,210	\$ 27,667,210	\$ 21,785,741	\$ 5,881,469	\$-	\$-	\$-
Short-Term Investments	\$ 37,276,451	\$ 37,275,256	\$-	\$ 37,276,451	\$-	\$-	\$-
Bonds	\$ 1,009,876,750	\$ 973,921,890	\$-	\$ 1,009,876,750	\$-	\$-	\$-
Preferred Stock	\$ 1,634,157	\$ 1,634,157	\$ 1,634,157	\$-	\$-	\$-	\$-
Common Stock	\$ 754,289,966	\$ 754,289,966	\$ 747,372,872	\$ 3,803,400	\$ 3,113,694	\$-	\$-
Other Invested Assets	\$ 934,271	\$ 619,855	\$-	\$ 934,271	\$-	\$-	\$-

D. Not Practicable to Estimate Fair Value

Not applicable

E. NAV Practical Expedient Investments

Not applicable

NOTE 21 Other Items

A. Unusual or Infrequent Items

The Company recorded expense in the amounts of \$10,359,734 and \$46,869,683 during 2021 and 2020, respectively, within Incentive pool, withhold adjustments, and bonus amounts on the Statement of Revenue and Expenses for special one-time provider incentive payments.

B. Troubled Debt Restructuring

Not applicable

C. Other Disclosures

Assets in the amount of \$3,558,656 at December 31, 2021 were committed to purchase mortgage-backed securities in 2022.

D. Business Interruption Insurance Recoveries

Not applicable

E. State Transferable and Non-transferable Tax Credits

Not applicable

- F. Subprime Mortgage Related Risk Exposure
 - (1) Description of the Subprime-Mortgage-Related Risk Exposure and Related Risk Management Practices

The Company's investment policy, approved by the Board of Directors, requires the use of high quality fixed income investments to cover its contractual liabilities. The investment policy requires that the Company's fixed income portfolio, excluding non-agency mortgage-backed securities, have a minimum average quality rating of BBB+ and the total of below investment grade securities, excluding non-agency mortgage-backed securities, is limited to 10% of the total portfolio. Further, no single issue, with the exception of US Government and Agency securities, can exceed 5% of an external investment manager's portfolio at time of purchase. The Company allows certain external investment managers to purchase non-agency mortgage-backed securities, and credit quality of those securities is at manager discretion with NAIC designation 1 or 2 preferred. The Company utilizes its strategic and tactical asset allocation to manage risk exposure, through allocations to various external investment managers with varying mandates.

The Company's exposure to subprime mortgages at December 31, 2021 is 1.9% of its total portfolio. The Company is receiving principal and interest payments on the subprime mortgage securities, and the Company does not require sale of these types of assets to meet future cash flow requirements. These securities are in gross unrealized gain and loss positions of \$4,717,251 and \$307,856, respectively, as of December 31, 2021. While no single definition exists for subprime, these securities are considered higher risk and carry higher than prime rates of interest. In addition to the interest rates, the Company considers the FICO scores below 660, level of documentation, evidence of delinquency, foreclosure, judgments or bankruptcy and other factors that limit the borrower's ability to service the debt when determining if a security should be classified as subprime.

(2) Direct Exposure Through Investments in Subprime Mortgage Loans

Not applicable

(3) Direct Exposure Through Other Investments

	Actual Cost	Carry (ex	ying Value xcluding hterest)	Fair Value	Other-Than- Temporary Impairment Losses Recognized
a. Residential mortgage-backed securities	\$ 52,502,623	\$ 5	5,102,401	\$ 59,534,003	\$ -
b. Commercial mortgage-backed securities					
c. Collateralized debt obligations					
d. Structured securities					
e. Equity investment in SCAs *					
f. Other assets					
g. Total	\$ 52,502,623	\$ 5	5,102,401	\$ 59,534,003	\$ -

* These investments comprise 0.000% of the companies invested assets.

(4) Underwriting Exposure to Subprime Mortgage Risk Through Mortgage Guaranty or Financial Guaranty Insurance Coverage

Not applicable

G. Retained Assets

Not applicable

H. Insurance-Linked Securities (ILS) Contracts

Not applicable

I. The Amount That Could Be Realized on Life Insurance Where the Reporting Entity is Owner and Beneficiary or Has Otherwise Obtained Rights to Control the Policy

Not applicable

NOTE 22 Events Subsequent

Type I - Recognized Subsequent Events:

Subsequent events have been considered through February 16, 2022 for the statutory statement issued on February 24, 2022.

Type II – Nonrecognized Subsequent Events:

Subsequent events have been considered through February 16, 2022 for the statutory statement issued on February 24, 2022.

NOTE 23 Reinsurance

Not applicable

NOTE 24 Retrospectively Rated Contracts & Contracts Subject to Redetermination

A. Method Used to Estimate Accrued Retrospective Premium Adjustments

The Company's participation in the Medicare Part D program includes a risk sharing provision with CMS. The Company estimates accrued retrospective premium adjustments for its Medicare Part D products through a prescribed formula approach. CMS adjusts its payments to the Company based on how actual benefit costs varied from the costs anticipated in the Company's bid for the Medicare Part D products. At December 31, 2021, the Company had five prior years remaining to be settled with CMS for the Medicare Part D products. The risk sharing amounts relating to all other prior years have been settled with CMS.

The Company estimates accrued retrospective premium adjustments for individuals, small groups and large groups according to retrospective rating features pursuant to the medical loss ratio rebate requirements subject to the Public Health Service Act.

B. Retrospective Premiums Recorded Through Written Premium or Adjustment to Earned Premium

The Company records accrued retrospective premium as an adjustment to earned premium.

C. Amount and Percentage of Net Premiums Written Subject to Retrospective Rating Features

The amount of net premiums written by the Company at December 31, 2021 that are subject to retrospective rating features was \$1,789,474,696, which represented 70.1% of the total net premiums written by the Company. No other net premiums written by the Company are subject to retrospective rating features.

D. Medical Loss Ratio Rebates Required Pursuant to the Public Health Service Act

	1		2		3			4 Other			5
	Individual			Small Group Employer		Large Group Employer		Categories with Rebates			Total
Prior Reporting Year											
(1) Medical loss ratio rebates incurred	\$	-	\$	6,400,000	\$		\$		-	\$	6,400,000
(2) Medical loss ratio rebates paid	\$	-	\$	-	\$		\$		-	\$	-
(3) Medical loss ratio rebates unpaid	\$	-	\$	6,400,000	\$		\$		-	\$	6,400,000
(4) Plus reinsurance assumed amounts	XXX			XXX		XXX		XXX			
(5) Less reinsurance ceded amounts	XXX			XXX		XXX		XXX			
(6) Rebates unpaid net of reinsurance	XXX			XXX		XXX		XXX		\$	6,400,000
Current Reporting Year-to-Date											
(7) Medical loss ratio rebates incurred	\$	-	\$	(5,641,057)	\$		\$		-	\$	(5,641,057)
(8) Medical loss ratio rebates paid	\$	-	\$	758,943	\$		\$		-	\$	758,943
(9) Medical loss ratio rebates unpaid	\$	-	\$	-	\$		\$		-	\$	-
(10) Plus reinsurance assumed amounts	XXX			XXX		XXX		XXX			
(11) Less reinsurance ceded amounts	XXX			XXX		XXX		XXX			
(12) Rebates unpaid net of reinsurance	XXX			XXX		XXX		XXX		\$	-

E. Risk Sharing Provisions of the Affordable Care Act

(1) Did the reporting entity write accident and health insurance premium which is subject to the Affordable Care Act risk sharing provisions (YES/NO)? Yes [X] No []

(2) Impact of Risk Sharing Provisions of the Affordable Care Act on admitted assets, liabilities and revenue for the current year:

Impact of Risk Sharing Provisions of the Affordable Care Act on admitted assets, liabilities and revenue for the current year:							
a. Permanent ACA Risk Adjustment Program							
Assets							
 Premium adjustments receivable due to ACA Risk Adjustment (including high-risk pool payments) Liabilities 	\$	17,689,000					
2. Risk adjustment user fees payable for ACA Risk Adjustment	\$	122,566					
3. Premium adjustments payable due to ACA Risk Adjustment (including high-risk pool premium)	\$	1,110,000					
Operations (Revenue & Expense)							
4. Reported as revenue in premium for accident and health contracts (written/collected) due to ACA Risk							
Adjustment	\$	18,980,050					
5. Reported in expenses as ACA risk adjustment user fees (incurred/paid)	\$	122,229					
b. Transitional ACA Reinsurance Program							
Assets							
1. Amounts recoverable for claims paid due to ACA Reinsurance	\$	-					
2. Amounts recoverable for claims unpaid due to ACA Reinsurance (contra liability)	\$	-					
3. Amounts receivable relating to uninsured plans for contributions for ACA Reinsurance	\$	-					
Liabilities							
4. Liabilities for contributions payable due to ACA Reinsurance – not reported as ceded premium	\$	-					
5. Ceded reinsurance premiums payable due to ACA Reinsurance	\$	-					
6. Liabilities for amounts held under uninsured plans contributions for ACA Reinsurance	\$	-					
Operations (Revenue & Expense)							
7. Ceded reinsurance premiums due to ACA Reinsurance	\$	-					
8. Reinsurance recoveries (income statement) due to ACA Reinsurance payments or expected payments	\$	-					
9. ACA Reinsurance contributions – not reported as ceded premium	\$	-					
c. Temporary ACA Risk Corridors Program							
Assets							
1. Accrued retrospective premium due to ACA Risk Corridors Liabilities	\$	-					
2. Reserve for rate credits or policy experience rating refunds due to ACA Risk Corridors	\$	-					
Operations (Revenue & Expense)							
3. Effect of ACA Risk Corridors on net premium income (paid/received)	\$	-					
4. Effect of ACA Risk Corridors on change in reserves for rate credits	\$	-					

(3) Roll forward of prior year ACA risk sharing provisions for the following asset (gross of any nonadmission) and liability balances along with the reasons for adjustments to the prior year balance:

					Differ	ences	Ad	djustments			ances as of the ng Date
	Year on Bus Before De	ring the Prior siness Written ecember 31 Prior Year	Current Year Written Before	Paid as of the r on Business December 31 rior Year	Prior Year Accrued Less Payments (Col 1 - 3)	Prior Year Accrued Less Payments (Col 2 - 4)	To Prior Year Balances	To Prior Year Balances		Cumulative Balance from Prior Years (Col 1-3+7)	Cumulative Balance from Prior Years (Col 2-4+8)
	1	2	3	4	5	6	7	8		9	10
	Receivable	Payable	Receivable	Payable	Receivable	Payable	Receivable	Payable	Ref	Receivable	Payable
a. Permanent ACA Risk Adjustment Program											
 Premium adjustments receivable (including high- risk pool payments) 	\$18,154,000	\$-	\$20,345,172	\$-	\$(2,191,172)	\$-	\$ 2,191,172	\$-	A	\$-	\$-
2. Premium adjustments (payable) (including high- risk pool premium)	\$-	\$(1,241,994)	\$-	\$(1,107,026)	\$-	\$ (134,968)	\$-	\$ 134,968	В	\$-	\$-
3. Subtotal ACA Permanent Risk Adjustment Program	\$18,154,000	\$(1,241,994)	\$20,345,172	\$(1,107,026)	\$(2,191,172)	\$ (134,968)	\$ 2,191,172	\$ 134,968		\$-	\$-
b. Transitional ACA Reinsurance Program											
1. Amounts recoverable for claims paid					\$-	\$-				\$-	\$-
2. Amounts recoverable for claims unpaid (contra liability)					\$-	\$-				\$-	\$-
3. Amounts receivable relating to uninsured plans					\$-	\$-				\$-	\$-
4. Liabilities for contributions payable due to ACA Reinsurance - not reported as ceded premium					\$-	\$-				\$-	\$-
5. Ceded reinsurance premiums payable					\$-	\$-				\$-	\$-
6. Liability for amounts held under uninsured plans					\$-	\$-				\$-	\$-
7. Subtotal ACA Transitional Reinsurance Program	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$-		\$-	\$-
c. Temporary ACA Risk Corridors Program											
1. Accrued retrospective premium					\$-	\$-				\$-	\$-
2. Reserve for rate credits or policy experience rating refunds					\$-	\$-				\$-	\$-
3. Subtotal ACA Risk Corridors Program	\$-	\$-	\$-	\$-	\$-	\$-	\$-	\$-		\$-	\$-
d. Total for ACA Risk Sharing Provisions	\$18,154,000	\$(1,241,994)	\$20,345,172	\$(1,107,026)	\$(2,191,172)	\$ (134,968)	\$ 2,191,172	\$ 134,968		\$ -	\$-

Explanations of Adjustments

A. Revised data received.

B. Revised data received.

(4) Roll-Forward of Risk Corridors Asset and Liability Balances by Program Benefit Year

Not applicable

(5) ACA Risk Corridors Receivable as of Reporting Date

Not applicable

NOTE 25 Change in Incurred Claims and Claim Adjustment Expenses

A. Change in Incurred Claims and Claim Adjustment Expenses

The Company's December 31, 2020 reserves for incurred claims and claim adjustment expenses attributable to insured events of prior years of \$323,543,322 have decreased \$38,394,248. Because unpaid losses are estimated based on past experience and accumulated statistical data, the Company's actual benefit payments have varied from the original estimates.

B. Information About Significant Changes in Methodologies and Assumptions

There have been no significant changes in methodologies and assumptions used in calculating the liability for unpaid losses and loss adjustment expenses.

NOTE 26 Intercompany Pooling Arrangements

Not applicable

NOTE 27 Structured Settlements

Not applicable

NOTE 28 Health Care Receivables

A. Pharmaceutical Rebate Receivables

Date	Estimated Pharmacy Rebates as Reported on Financial Statements	 Pharmacy bates as Billed or Otherwise Confirmed	Re	ctual Rebates ceived Within Days of Billing	Re	ctual Rebates eceived Within to 180 Days of Billing	R	ctual Rebates eceived More nan 180 Days After Billing
12/31/2021	\$ 57,984,871	\$ -	\$	-	\$	-	\$	-
09/30/2021	\$ 57,477,038	\$ 60,916,770	\$	-	\$	-	\$	-
06/30/2021	\$ 59,066,090	\$ 57,988,054	\$	-	\$	51,578,845	\$	-
03/31/2021	\$ 58,577,767	\$ 58,579,834	\$	-	\$	49,247,460	\$	535,304
12/31/2020	\$ 53,561,441	\$ 59,481,842	\$	-	\$	49,474,449	\$	9,650,312
09/30/2020	\$ 58,658,373	\$ 56,329,924	\$	-	\$	42,154,009	\$	14,015,301
06/30/2020	\$ 58,581,896	\$ 52,522,647	\$	-	\$	40,841,639	\$	11,568,895
03/31/2020	\$ 60,145,212	\$ 52,767,546	\$	-	\$	42,506,557	\$	10,268,870
12/31/2019	\$ 49,977,821	\$ 49,072,214	\$	-	\$	43,571,958	\$	5,330,351
09/30/2019	\$ 48,330,912	\$ 52,714,811	\$	-	\$	40,908,128	\$	11,600,079
06/30/2019	\$ 48,934,388	\$ 52,016,689	\$	-	\$	39,689,129	\$	12,092,178
03/31/2019	\$ 45,259,334	\$ 48,143,867	\$	-	\$	35,286,669	\$	13,355,545

B. Risk-Sharing Receivables

Not applicable

NOTE 29 Participating Policies

Not applicable

NOTE 30 Premium Deficiency Reserves

1. Liability carried for premium deficiency reserves	\$ -
2. Date of the most recent evaluation of this liability	01/24/2022
3. Was anticipated investment income utilized in the calculation?	Yes [X] No []

NOTE 31 Anticipated Salvage and Subrogation

Not applicable

GENERAL INTERROGATORIES

PART 1 - COMMON INTERROGATORIES

GENERAL

1.1	Is the reporting entity a member of an Insurance Holding Company System is an insurer?					Yes [X] No []		
1.2	If yes, did the reporting entity register and file with its domiciliary State Ins such regulatory official of the state of domicile of the principal insurer in th providing disclosure substantially similar to the standards adopted by the its Model Insurance Holding Company System Regulatory Act and model subject to standards and disclosure requirements substantially similar to t	he Holding Comp National Associa I regulations pert	oany System, a regis ation of Insurance Co aining thereto, or is t	tration statement ommissioners (NAIC) in he reporting entity	Yes [)	(] No [] N/A []		
1.3	State Regulating?					lowa		
1.4	Is the reporting entity publicly traded or a member of a publicly traded gro	oup?				Yes [] No [X]		
1.5	If the response to 1.4 is yes, provide the CIK (Central Index Key) code iss	sued by the SEC	for the entity/group.					
2.1	Has any change been made during the year of this statement in the chart reporting entity?					Yes [] No [X]		
2.2	If yes, date of change:							
3.1	State as of what date the latest financial examination of the reporting entit	ity was made or i	s being made			12/31/2016		
3.2	State the as of date that the latest financial examination report became an entity. This date should be the date of the examined balance sheet and ne					12/31/2016		
3.3	State as of what date the latest financial examination report became avail domicile or the reporting entity. This is the release date or completion date examination (balance sheet date).	te of the examina	ition report and not th	ne date of the	06/29/2018			
3.4	By what department or departments? Iowa Insurance Division							
3.5	Have all financial statement adjustments within the latest financial examin statement filed with Departments?	nation report bee	n accounted for in a	subsequent financial	Yes [] No [] N/A [X]		
3.6	Have all of the recommendations within the latest financial examination re	eport been comp	lied with?		Yes [] No [] N/A [X]		
4.1 4.2	During the period covered by this statement, did any agent, broker, sales combination thereof under common control (other than salaried employed a substantial part (more than 20 percent of any major line of business me 4.11 sales of 4.12 renewa During the period covered by this statement, did any sales/service organic	es of the reportin easured on direct of new business? als?	g entity), receive cre premiums) of:	dit or commissions for o	control	Yes [X] No [] Yes [X] No []		
4.2	receive credit or commissions for or control a substantial part (more than premiums) of:							
	4.21 sales o					Yes [] No [X] Yes [] No [X]		
5.1	Has the reporting entity been a party to a merger or consolidation during t If yes, complete and file the merger history data file with the NAIC.							
5.2	If yes, provide the name of the entity, NAIC Company Code, and state of ceased to exist as a result of the merger or consolidation.	domicile (use tw	o letter state abbrevi	ation) for any entity that	has			
	1		2	3				
	Name of Entity		IC Company Code	State of Domicile				
6.1	Has the reporting entity had any Certificates of Authority, licenses or regis revoked by any governmental entity during the reporting period?					Yes [] No [X]		
6.2	If yes, give full information:							
7.1	Does any foreign (non-United States) person or entity directly or indirectly	y control 10% or	more of the reporting	ı entity?		Yes [] No [X]		
7.2	If yes, 7.21 State the percentage of foreign control;					94		
	7.22 State the nationality(s) of the foreign person(s) or entity(s) or if the enationality, and identify the type of entity(s) (e.g., individual, corr	entity is a mutual	or reciprocal, the nat	ionality of its manager o				
	1 Nationality		2 Type of En	tity				
			••					

GENERAL INTERROGATORIES

8.1 8.2	Is the company a subsidiary of a depository institution holding company If the response to 8.1 is yes, please identify the name of the DIHC.				,	Yes []	No [X]
8.3 8.4	Is the company affiliated with one or more banks, thrifts or securities fir If response to 8.3 is yes, please provide below the names and location regulatory services agency [i.e. the Federal Reserve Board (FRB), the Insurance Corporation (FDIC) and the Securities Exchange Commission	n (city and state of the main office) of any affiliates re Office of the Comptroller of the Currency (OCC), th	egulateo ne Fede	l by a feo ral Depo	deral	Yes []	No [X]
		2	3	4	5	6			
	Affiliate Name	Location (City, State)	FRB	000	FDIC				
8.5	ls the reporting entity a depository institution holding company with sign								
8.6	Federal Reserve System or a subsidiary of the reporting entity? If response to 8.5 is no, is the reporting entity a company or subsidiary	of a company that has otherwise been made subje	ct to the)		Yes [-		
9.	Federal Reserve Board's capital rule?				res [] No [XJ	N/A	1 1
0.	Ernst & Young LLP, 801 Grand Avenue, Des Moines, IA 50309	-							
10.1	Has the insurer been granted any exemptions to the prohibited non-au requirements as allowed in Section 7H of the Annual Financial Reporti law or regulation?	idit services provided by the certified independent p ing Model Regulation (Model Audit Rule), or substa	ublic ac ntially s	countan milar sta	t ate	Yes [1	No [í X 1
10.2	If the response to 10.1 is yes, provide information related to this exemp	ption:							
10.3 10.4	Has the insurer been granted any exemptions related to the other requ allowed for in Section 18A of the Model Regulation, or substantially sin If the response to 10.3 is yes, provide information related to this exempt	nilar state law or regulation?	Regulat	on as		Yes []	No [[X]
10.5	Has the reporting entity established an Audit Committee in compliance					1 No [1	N//	۲ I Δ
10.6	If the response to 10.5 is no or n/a, please explain	,			103 [7] 110 [1	11/ 7	`L]
11.	What is the name, address and affiliation (officer/employee of the repo firm) of the individual providing the statement of actuarial opinion/certifi Daniel J. Callahan, Senior Actuary, FSA, MAAA (employee), 1331 Gra	fication? and Avenue, Des Moines, IA 50309-2901	n actuar	al consu					
12.1	Does the reporting entity own any securities of a real estate holding con	mpany or otherwise hold real estate indirectly?				Yes []	No [X]
		estate holding company							
		rcels involved							
12.2	If, yes provide explanation:	usted carrying value				\$			
12.2									
13.	FOR UNITED STATES BRANCHES OF ALIEN REPORTING ENTITIE								
13.1	What changes have been made during the year in the United States m	nanager or the United States trustees of the reportin	• •						
13.2	Does this statement contain all business transacted for the reporting en	ntity through its United States Branch on risks when	rever loo	ated?		Yes []	No [i 1
13.3	Have there been any changes made to any of the trust indentures durin					Yes []	No [1
13.4	If answer to (13.3) is yes, has the domiciliary or entry state approved th] No []	N//	A[]
14.1	Are the senior officers (principal executive officer, principal financial off similar functions) of the reporting entity subject to a code of ethics, while a. Honest and ethical conduct, including the ethical handling of actual or relationships;	ich includes the following standards? or apparent conflicts of interest between personal a	nd profe		g 	Yes [X	[]	No []
	 b. Full, fair, accurate, timely and understandable disclosure in the period c. Compliance with applicable governmental laws, rules and regulation d. The prompt internal reporting of violations to an appropriate person of 	ns;	ity;						
1/11	e. Accountability for adherence to the code.								
14.11	If the response to 14.1 is No, please explain:								
14.2 14.21	Has the code of ethics for senior managers been amended? If the response to 14.2 is yes, provide information related to amendment					Yes []	No [[X]
14.3 14.31	Have any provisions of the code of ethics been waived for any of the sp If the response to 14.3 is yes, provide the nature of any waiver(s).					Yes []	No [[X]

GENERAL INTERROGATORIES

15.1 Is the reporting entity the beneficiary of a Letter of Credit that is unrelated to reinsurance where the issuing or confirming bank is not on the SVO Bank List?

15.2 If the response to 15.1 is yes, indicate the American Bankers Association (ABA) Routing Number and the name of the issuing or confirming bank of the Letter of Credit and describe the circumstances in which the Letter of Credit is triggered.

Yes [] No [X]

1	2	3	4
American			
Bankers			
Association			
(ABA) Routing			
Number	Issuing or Confirming Bank Name	Circumstances That Can Trigger the Letter of Credit	Amount

BOARD OF DIRECTORS

16.	Is the purchase or sale of all investments of the reporting entity passed upon either by the board thereof?		Yes [X]	No []
17.	Does the reporting entity keep a complete permanent record of the proceedings of its board of or thereof?		Yes [X]	No []
18.	Has the reporting entity an established procedure for disclosure to its board of directors or truster part of any of its officers, directors, trustees or responsible employees that is in conflict with the	ees of any material interest or affiliation on the	Yes [X]	No []
	FINANCIAL			
19.	Has this statement been prepared using a basis of accounting other than Statutory Accounting Accounting Principles)?		Yes []	No [X]
20.1	Total amount loaned during the year (inclusive of Separate Accounts, exclusive of policy loans):	20.11 To directors or other officers	.\$	
		20.12 To stockholders not officers	.\$	
		20.13 Trustees, supreme or grand (Fraternal Only)	.\$	
20.2	Total amount of loans outstanding at the end of year (inclusive of Separate Accounts, exclusive	of		
	policy loans):	20.21 To directors or other officers		
		20.22 To stockholders not officers	.\$	
		20.23 Trustees, supreme or grand (Fraternal Only)	.\$	
21.1	Were any assets reported in this statement subject to a contractual obligation to transfer to ano obligation being reported in the statement?	ther party without the liability for such		
21.2	If yes, state the amount thereof at December 31 of the current year:	21.21 Rented from others		
		21.22 Borrowed from others	.\$	
		21.23 Leased from others	\$	
		21.24 Other	.\$	
22.1	Does this statement include payments for assessments as described in the Annual Statement In guaranty association assessments?	nstructions other than guaranty fund or		
22.2	5	22.21 Amount paid as losses or risk adjustment \$ 22.22 Amount paid as expenses		
		22.23 Other amounts paid	\$	
23.1	Does the reporting entity report any amounts due from parent, subsidiaries or affiliates on Page	2 of this statement?	Yes [X]	No []
23.2	If yes, indicate any amounts receivable from parent included in the Page 2 amount:			
24.1	Does the insurer utilize third parties to pay agent commissions in which the amounts advanced 90 days?	by the third parties are not settled in full within		No [X]
24.2	If the response to 24.1 is yes, identify the third-party that pays the agents and whether they are			

	ls the Third-Party Agent a Related Party
Name of Third-Party	(Yes/No)

INVESTMENT

GENERAL INTERROGATORIES

25.02 If no, give full and complete information relating thereto

25.03 For securities lending programs, provide a description of the program including value for collateral and amount of loaned securities, and whether collateral is carried on or off-balance sheet. (an alternative is to reference Note 17 where this information is also provided) Refer to Note 17.

25.04	For the reporting entity' Instructions.	s securities lending program, report amount of collate	eral for conforming programs as outlined in the Risk-Based (Capital \$			
25.05	For the reporting entity'	s securities lending program, report amount of collate	eral for other programs.	\$			
25.06	Does your securities le outset of the contract?	nding program require 102% (domestic securities) ar	d 105% (foreign securities) from the counterparty at the	Yes [X] No [] N/	A[]
25.07	Does the reporting enti	ty non-admit when the collateral received from the co	unterparty falls below 100%?	Yes [] No [] N/	A [X]
25.08			ilize the Master Securities lending Agreement (MSLA) to	Yes [X] No [] N/	A[]
25.09	For the reporting entity'	s securities lending program state the amount of the	following as of December 31 of the current year:				
	25.091	Total fair value of reinvested collateral assets report	ed on Schedule DL, Parts 1 and 2.	\$			0
	25.092	Total book adjusted/carrying value of reinvested col	lateral assets reported on Schedule DL, Parts 1 and 2	\$			0
	25.093	Total payable for securities lending reported on the	liability page.	\$			0
26.1	control of the reporting	entity, or has the reporting entity sold or transferred	at December 31 of the current year not exclusively under the any assets subject to a put option contract that is currently in	า	Yes [X] No	[]
26.2	If yes, state the amount	t thereof at December 31 of the current year:	26.21 Subject to repurchase agreements	\$		5.	881.469
	•		26.22 Subject to reverse repurchase agreements	\$;	,	, -
			26.23 Subject to dollar repurchase agreements	\$			
			26.24 Subject to reverse dollar repurchase agreem	ents\$			
			26.25 Placed under option agreements	\$			
			26.26 Letter stock or securities restricted as to sale excluding FHLB Capital Stock	e - 			
			26.27 FHLB Capital Stock	\$			803,400
			26.28 On deposit with states	\$			·
			26.29 On deposit with other regulatory bodies	\$			
			26.30 Pledged as collateral - excluding collateral pl an FHLB	\$			
			26.31 Pledged as collateral to FHLB - including as backing funding agreements	sets	:		
			26.32 Other	۰۰۰۰۰۰. ¢			
				¥	,		

26.3 For category (26.26) provide the following:

	1 Nature of Restriction	2 Description	Am	3 iount		
27.1		hedule DB?	Yes []	No []	X]
	If no, attach a description with this statement.	nade available to the domiciliary state?] No []	N/A	[X]
27.3	7.3 through 27.5: FOR LIFE/FRATERNAL REPORTING ENTITIES ONI Does the reporting entity utilize derivatives to hedge variable annuity gu		Yes []	No []
27.4	27.42 Per	ecial accounting provision of SSAP No. 108 mitted accounting practice er accounting guidance	Yes [jı	No [No [No []]]
27.5	 reserves and provides the impact of the hedging strategy within Financial Officer Certification has been obtained which indicated 	niciliary state. s consistent with the requirements of VM-21. he hedging strategy is incorporated within the establishment of VM-21	Yes []	No []
28.1	Were any preferred stocks or bonds owned as of December 31 of the c issuer, convertible into equity?		Yes []	No []	X]
28.2	If yes, state the amount thereof at December 31 of the current year		\$			
29.	Excluding items in Schedule E - Part 3 - Special Deposits, real estate, r offices, vaults or safety deposit boxes, were all stocks, bonds and other custodial agreement with a qualified bank or trust company in accordan Outsourcing of Critical Functions, Custodial or Safekeeping Agreement	securities, owned throughout the current year held pursuant to a ce with Section 1, III - General Examination Considerations, F.	Yes []	X]	No []

29.01 For agreements that comply with the requirements of the NAIC Financial Condition Examiners Handbook, complete the following:

1	2
Name of Custodian(s)	Custodian's Address
The Bank of New York Mellon	BNY Mellon Center, 500 Grant Street, Pittsburgh, PA 15258
Bankers Trust Company	453 7th Street, Des Moines, IA 50309

GENERAL INTERROGATORIES

29.02 For all agreements that do not comply with the requirements of the NAIC Financial Condition Examiners Handbook, provide the name, location and a complete explanation:

1 Name(s)	2 Location(s)	3 Complete Explanation(s)

1	2	3	4
Old Custodian	New Custodian	Date of Change	Reason

29.05 Investment management – Identify all investment advisors, investment managers, broker/dealers, including individuals that have the authority to make investment decisions on behalf of the reporting entity. For assets that are managed internally by employees of the reporting entity, note as such. ["...that have access to the investment accounts"; "...handle securities"]

1	2
Name of Firm or Individual	Affiliation
NISA Investment Advisors, LLC	U
Wellington Management Company LLP	U
William Blair Investment Management, LLC	U
BlackRock Financial Management, Inc.	U
Metropolitan West Asset Management, LLC	U
Pyrford International, Ltd.	U

29.06 For those firms or individuals listed in the table for 29.05 with an affiliation code of "A" (affiliated) or "U" (unaffiliated), provide the information for the table below.

1	2	3	4	5
				Investment
				Management
Central Registration				Agreement
Depository Number	Name of Firm or Individual	Legal Entity Identifier (LEI)	Registered With	(IMA) Filed
107313	NISA Investment Advisors, LLC	549300L1IG2J0W7XNY28	SEC	NO
106595	Wellington Management Company LLP	549300YHP12TEZNLCX41	SEC	NO
173961	William Blair Investment Management, LLC	549300VQX7UK060A7X27	SEC	N0
107105	BlackRock Financial Management, Inc.	549300LVXY1VJKE13M84	SEC	NO
104571	Metropolitan West Asset Management, LLC	5493004MDKGXC001Y283	SEC	NO
105646	Pyrford International, Ltd.	549300N5W87B21SAUG48	SEC	NO

30.1 Does the reporting entity have any diversified mutual funds reported in Schedule D, Part 2 (diversified according to the Securities and Exchange Commission (SEC) in the Investment Company Act of 1940 [Section 5(b)(1)])?

30.2 If yes, complete the following schedule:

1	2	3
		Book/Adjusted
CUSIP #	Name of Mutual Fund	Carrying Value
693390-60-1	PIMCO Short-term Instl	1,974,343
72201F-49-0	PIMCO Income Instl	
969251-50-3	William Blair Emerging Markets	
30.2999 - Total		151,188,385

Yes [X] No []

30.3 For each mutual fund listed in the table above, complete the following schedule:

1	2	3	4
		Amount of Mutual	
		Fund's Book/Adjusted	
		Carrying Value	
	Name of Significant Holding of the	Attributable to the	Date of
Name of Mutual Fund (from above table)	Mutual Fund	Holding	Valuation
PIMCO Short-term Instl	PIMCO Short-Term Floating NAV Portfolio III		09/30/2021
PIMCO Short-term Instl			09/30/2021
PIMCO Short-term Instl	PIMCO Short Asset Portfolio		09/30/2021
PIMCO Short-term Instl	Ginnie Mae 0.450% due 06/20/2051 - 07/20/2051		09/30/2021
PIMCO Short-term Instl	Federal Home Loan Bank 1.020% due 02/24/2027		09/30/2021
	Uniform Mortgage-Backed Security 4.000% due		
PIMCO Income Instl	09/01/2023 - 05/01/2051	3.847.988	09/30/2021
	Uniform Mortgage-Backed Security TBA 2.000% due	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
PIMCO Income Instl	10/01/2036 - 10/01/2051	2 416 428	09/30/2021
	Credit Suisse Mortgage Capital Trust 3.281% due		
PIMCO Income Instl		1 610 929	09/30/2021
	Uniform Mortgage-Backed Security 2.500% due		
PIMCO Income Instl		1 581 521	09/30/2021
	Uniform Mortgage-Backed Security 4.000% due	1,001,021	
PIMCO Income Instl	07/01/2046 00/01/2050	1 242 222	
	U//UI/2040 - U9/UI/2050	1, 343, 223	
William Blair Emerging Markets			09/30/2021
William Blair Emerging Markets	Tencent Holdings Ltd.		09/30/2021
William Blair Emerging Markets William Blair Emerging Markets	Alibaba Group Holding	2,680,460	09/30/2021
William Blair Emerging Markets	Reliance Industries Ltd.	2,680,460	09/30/2021

1	2	3	4
		Amount of Mutual	
		Fund's Book/Adjusted	
		Carrying Value	
	Name of Significant Holding of the	Attributable to the	Date of
Name of Mutual Fund (from above table)	Mutual Fund	Holding	Valuation
William Blair Emerging Markets	MercadoLibre, Inc.	1,806,397	09/30/2021
		· · ·	

GENERAL INTERROGATORIES

31. Provide the following information for all short-term and long-term bonds and all preferred stocks. Do not substitute amortized value or statement value for fair value.

	1	2	3
			Excess of Statement
			over Fair Value (-), or
	Statement (Admitted)		Fair Value over
	Value	Fair Value	Statement (+)
31.1 Bonds	1,011,197,146	1,047,153,201	
31.2 Preferred stocks	1,634,157	2,442,304	
31.3 Totals	1,012,831,303	1,049,595,505	36,764,202

31.4 Describe the sources or methods utilized in determining the fair values:

	The Company obtains at least one price from a third party pricing service or its custodian, which also uses a pricing service. In most instances, the Company obtains more than one price and evaluates between the pricing sources for any outliers or stale prices. Assuming prices are not stale and are reasonable between sources, the Company follows a pre-established hierarchy to determine which pricing source to utilize.				
32.1	Was the rate used to calculate fair value determined by a broker or custodian for any of the securities in Schedule D?	Yes	[X]	No	[]
32.2	If the answer to 32.1 is yes, does the reporting entity have a copy of the broker's or custodian's pricing policy (hard copy or electronic copy) for all brokers or custodians used as a pricing source?	Yes	[X]	No)[]
32.3	If the answer to 32.2 is no, describe the reporting entity's process for determining a reliable pricing source for purposes of disclosure of fair value for Schedule D:				
33.1 33.2	Have all the filing requirements of the Purposes and Procedures Manual of the NAIC Investment Analysis Office been followed?	Yes	[X]	No)[]
34.	 By self-designating 5GI securities, the reporting entity is certifying the following elements of each self-designated 5GI security: a. Documentation necessary to permit a full credit analysis of the security does not exist or an NAIC CRP credit rating for an FE or PL security is not available. b. Issuer or obligor is current on all contracted interest and principal payments. c. The insurer has an actual expectation of ultimate payment of all contracted interest and principal. 				
	Has the reporting entity self-designated 5GI securities?	Yes	[]	No) [X]
35.	 By self-designating PLGI securities, the reporting entity is certifying the following elements of each self-designated PLGI security: a. The security was purchased prior to January 1, 2018. b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security. c. The NAIC Designation was derived from the credit rating assigned by an NAIC CRP in its legal capacity as a NRSRO which is shown on a current private letter rating held by the insurer and available for examination by state insurance regulators. d. The reporting entity is not permitted to share this credit rating of the PL security with the SVO. 	V	r 1	Na	
36.	Has the reporting entity self-designated PLGI securities? By assigning FE to a Schedule BA non-registered private fund, the reporting entity is certifying the following elements of each self-designated	Yes		No) [X]
	 a. The shares were purchased prior to January 1, 2019. b. The reporting entity is holding capital commensurate with the NAIC Designation reported for the security. c. The security had a public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019. d. The fund only or predominantly holds bonds in its portfolio. e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO prior to January 1, 2019. d. The fund only or predominantly holds bonds in its portfolio. e. The current reported NAIC Designation was derived from the public credit rating(s) with annual surveillance assigned by an NAIC CRP in its legal capacity as an NRSRO. f. The public credit rating(s) with annual surveillance assigned by an NAIC CRP has not lapsed. Has the reporting entity assigned FE to Schedule BA non-registered private funds that complied with the above criteria? 	Yes	[]	Nc) [X]
37.	By rolling/renewing short-term or cash equivalent investments with continued reporting on Schedule DA, Part 1 or Schedule E Part 2 (identified through a code (%) in those investment schedules), the reporting entity is certifying to the following: a. The investment is a liquid asset that can be terminated by the reporting entity on the current maturity date.				
	 b. If the investment is with a nonrelated party or nonaffiliate, then it reflects an arms-length transaction with renewal completed at the discretion of all involved parties. c. If the investment is with a related party or affiliate, then the reporting entity has completed robust re-underwriting of the transaction for which documentation is available for regulator review. d. Short-term and cash equivalent investments that have been renewed/rolled from the prior period that do not meet the criteria in 37.a - 				
	37.c are reported as long-term investments. Has the reporting entity rolled/renewed short-term or cash equivalent investments in accordance with these criteria?	1 No	ſ	1 1	N/A [X]
	The are reporting only relied for we on or term of oddit equivalent investments in accordance with these offends:	1 110	L	1 1	10 L A 1

GENERAL INTERROGATORIES

OTHER

38.2 List the name of the organization and the amount paid if any such payment represented 25% or more of the total payments to trade associations, service organizations and statistical or rating bureaus during the period covered by this statement.

1 Name	2 Amount Paid
Blue Cross and Blue Shield Association	1,277,828

39.1 Amount of payments for legal expenses, if any?

.....3,469,694

..\$

39.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payments for legal expenses during the period covered by this statement.

1	2
Name	Amount Paid
Nvemaster Goode	1,022,081

40.1 Amount of payments for expenditures in connection with matters before legislative bodies, officers or departments of government, if any?......\$

40.2 List the name of the firm and the amount paid if any such payment represented 25% or more of the total payment expenditures in connection with matters before legislative bodies, officers or departments of government during the period covered by this statement.

1 Name	2 Amount Paid

GENERAL INTERROGATORIES

PART 2 - HEALTH INTERROGATORIES

	Does the reporting entity have any direct Medicare Supplement Insurance in force'		
.2	If yes, indicate premium earned on U.S. business only.		
.3	What portion of Item (1.2) is not reported on the Medicare Supplement Insurance I	xperience Exhibit?	.\$
	1.31 Reason for excluding		
.4	Indicate amount of earned premium attributable to Canadian and/or Other Alien no	t included in Item (1.2) above	.\$
.5	Indicate total incurred claims on all Medicare Supplement Insurance.		
.6	Individual policies:	Most current three years:	
		1.61 Total premium earned	
		1.62 Total incurred claims	
		1.63 Number of covered lives	
		All years prior to most current three years:	
		1.64 Total premium earned	
		1.65 Total incurred claims	
		1.66 Number of covered lives	
7	Group policies:	Most current three years:	
'	Group policies.	1.71 Total premium earned	¢
		1.72 Total incurred claims	
		1.73 Number of covered lives	
		All years prior to most current three years:	
		1.74 Total premium earned	\$
		1.75 Total incurred claims	
		1.76 Number of covered lives	
	Health Test:		
		1 2 Current Veer Dries Veer	
	2.1 Premium Numerator	Current Year Prior Year	
	2.1 Premium Numerator		
	2.2 Premium Denominator 2.3 Premium Ratio (2.1/2.2)		
	2.3 Premium Rauo (2.1/2.2)		
		452 770 292 418 252 751	
	 2.5 Reserve Denominator 2.6 Reserve Ratio (2.4/2.5) Has the reporting entity received any endowment or gift from contracting hospitals, returned when, as and if the earnings of the reporting entity permits? 	1.0001.000	Yes [] No [X]
	2.6 Reserve Ratio (2.4/2.5)	physicians, dentists, or others that is agreed will be	Yes [] No [X]
	2.6 Reserve Ratio (2.4/2.5) Has the reporting entity received any endowment or gift from contracting hospitals, returned when, as and if the earnings of the reporting entity permits? If yes, give particulars:	ns', and dentists' care offered to subscribers and	
2	2.6 Reserve Ratio (2.4/2.5) Has the reporting entity received any endowment or gift from contracting hospitals, returned when, as and if the earnings of the reporting entity permits? If yes, give particulars: Have copies of all agreements stating the period and nature of hospitals', physicial	ns', and dentists' care offered to subscribers and	Yes [X] No []
2 1 2	2.6 Reserve Ratio (2.4/2.5) Has the reporting entity received any endowment or gift from contracting hospitals, returned when, as and if the earnings of the reporting entity permits? If yes, give particulars: Have copies of all agreements stating the period and nature of hospitals', physicial dependents been filed with the appropriate regulatory agency?	ns', and dentists' care offered to subscribers and	Yes [X] No [] Yes [X] No []
2 1 2	2.6 Reserve Ratio (2.4/2.5) Has the reporting entity received any endowment or gift from contracting hospitals, returned when, as and if the earnings of the reporting entity permits? If yes, give particulars: Have copies of all agreements stating the period and nature of hospitals', physicial dependents been filed with the appropriate regulatory agency? If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these Does the reporting entity have stop-loss reinsurance? If no, explain:	ns', and dentists' care offered to subscribers and	Yes [X] No [] Yes [X] No []
2	2.6 Reserve Ratio (2.4/2.5) Has the reporting entity received any endowment or gift from contracting hospitals, returned when, as and if the earnings of the reporting entity permits? If yes, give particulars: Have copies of all agreements stating the period and nature of hospitals', physicial dependents been filed with the appropriate regulatory agency? If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these Does the reporting entity have stop-loss reinsurance?	ns', and dentists' care offered to subscribers and	Yes [X] No [] Yes [X] No []
2 1 2 1	2.6 Reserve Ratio (2.4/2.5) Has the reporting entity received any endowment or gift from contracting hospitals, returned when, as and if the earnings of the reporting entity permits? If yes, give particulars: Have copies of all agreements stating the period and nature of hospitals', physicial dependents been filed with the appropriate regulatory agency? If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these Does the reporting entity have stop-loss reinsurance? If no, explain:		Yes [X] No [] Yes [X] No [] Yes [] No [X]
2 1 2 1	2.6 Reserve Ratio (2.4/2.5) Has the reporting entity received any endowment or gift from contracting hospitals, returned when, as and if the earnings of the reporting entity permits? If yes, give particulars: Have copies of all agreements stating the period and nature of hospitals', physicial dependents been filed with the appropriate regulatory agency? If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these Does the reporting entity have stop-loss reinsurance? If no, explain: The Company retains all risk.	ns', and dentists' care offered to subscribers and	Yes [X] No [] Yes [X] No [] Yes [] No [X] \$9,999,99
2 1 2 1	2.6 Reserve Ratio (2.4/2.5) Has the reporting entity received any endowment or gift from contracting hospitals, returned when, as and if the earnings of the reporting entity permits? If yes, give particulars: Have copies of all agreements stating the period and nature of hospitals', physicial dependents been filed with the appropriate regulatory agency? If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these Does the reporting entity have stop-loss reinsurance? If no, explain: The Company retains all risk.		Yes [X] No [] Yes [X] No [] Yes [] No [X] \$9,999,99
2 1 2 1	2.6 Reserve Ratio (2.4/2.5) Has the reporting entity received any endowment or gift from contracting hospitals, returned when, as and if the earnings of the reporting entity permits? If yes, give particulars: Have copies of all agreements stating the period and nature of hospitals', physicial dependents been filed with the appropriate regulatory agency? If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these Does the reporting entity have stop-loss reinsurance? If no, explain: The Company retains all risk.	1.000	Yes [X] No [] Yes [X] No [] Yes [] No [X] \$9,999,99 \$
2 1 2 1	2.6 Reserve Ratio (2.4/2.5) Has the reporting entity received any endowment or gift from contracting hospitals, returned when, as and if the earnings of the reporting entity permits? If yes, give particulars: Have copies of all agreements stating the period and nature of hospitals', physicial dependents been filed with the appropriate regulatory agency? If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these Does the reporting entity have stop-loss reinsurance? If no, explain: The Company retains all risk.		Yes [X] No [] Yes [X] No [] Yes [] No [X] \$9,999,99 \$ \$9,999,99 \$
2 1 2 1	2.6 Reserve Ratio (2.4/2.5) Has the reporting entity received any endowment or gift from contracting hospitals, returned when, as and if the earnings of the reporting entity permits? If yes, give particulars: Have copies of all agreements stating the period and nature of hospitals', physicial dependents been filed with the appropriate regulatory agency? If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these Does the reporting entity have stop-loss reinsurance? If no, explain: The Company retains all risk.	1.000 1.000 physicians, dentists, or others that is agreed will be ns', and dentists' care offered to subscribers and agreements include additional benefits offered? 5.31 Comprehensive Medical 5.32 Medical Only 5.33 Medicare Supplement 5.34 Dental & Vision	Yes [X] No [] Yes [X] No [] Yes [] No [X] \$9,999,99 \$ \$9,999,99 \$
2 1 2 1 2 3	 Reserve Ratio (2.4/2.5) Has the reporting entity received any endowment or gift from contracting hospitals, returned when, as and if the earnings of the reporting entity permits? If yes, give particulars: Have copies of all agreements stating the period and nature of hospitals', physicial dependents been filed with the appropriate regulatory agency? If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these Does the reporting entity have stop-loss reinsurance? If no, explain: The Company retains all risk. Maximum retained risk (see instructions) 	1.000 1.000 physicians, dentists, or others that is agreed will be ns', and dentists' care offered to subscribers and agreements include additional benefits offered? 5.31 Comprehensive Medical 5.32 Medical Only 5.33 Medicare Supplement 5.34 Dental & Vision 5.35 Other Limited Benefit Plan 5.36 Other nd their dependents against the risk of insolvency including h providers to continue rendering services, and any other	Yes [X] No [] Yes [X] No [] Yes [] No [X] \$9,999,99 \$ \$9,999,99 \$
2 1 2 3	2.6 Reserve Ratio (2.4/2.5) Has the reporting entity received any endowment or gift from contracting hospitals, returned when, as and if the earnings of the reporting entity permits? If yes, give particulars: Have copies of all agreements stating the period and nature of hospitals', physicial dependents been filed with the appropriate regulatory agency? If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these Does the reporting entity have stop-loss reinsurance? If no, explain: The Company retains all risk. Maximum retained risk (see instructions) Describe arrangement which the reporting entity may have to protect subscribers a hold harmless provisions, conversion privileges with other carriers, agreements wi agreements: Reserves exceed all regulatory requirements. Member of lowa Life & Health Insur	1.000 1.000 physicians, dentists, or others that is agreed will be ns', and dentists' care offered to subscribers and agreements include additional benefits offered? 5.31 Comprehensive Medical 5.32 Medical Only 5.33 Medicare Supplement 5.34 Dental & Vision 5.35 Other Limited Benefit Plan 5.36 Other nd their dependents against the risk of insolvency including h providers to continue rendering services, and any other	Yes [X] No [] Yes [X] No [] Yes [] No [X] \$9,999,99 \$9,999,99 \$9,999,99 \$
2 1 2 3 1	 2.6 Reserve Ratio (2.4/2.5) Has the reporting entity received any endowment or gift from contracting hospitals, returned when, as and if the earnings of the reporting entity permits? If yes, give particulars: Have copies of all agreements stating the period and nature of hospitals', physicial dependents been filed with the appropriate regulatory agency? If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these Does the reporting entity have stop-loss reinsurance? If no, explain: The Company retains all risk. Maximum retained risk (see instructions) Describe arrangement which the reporting entity may have to protect subscribers a hold harmless provisions, conversion privileges with other carriers, agreements wi agreements: Reserves exceed all regulatory requirements. Member of lowa LIfe & Health Insur Does the reporting entity set up its claim liability for provider services on a service 	1.000 1.000 physicians, dentists, or others that is agreed will be ns', and dentists' care offered to subscribers and agreements include additional benefits offered? 5.31 Comprehensive Medical 5.32 Medical Only 5.33 Medicare Supplement 5.34 Dental & Vision 5.35 Other Limited Benefit Plan 5.36 Other nd their dependents against the risk of insolvency including h providers to continue rendering services, and any other	Yes [X] No [] Yes [X] No [] Yes [] No [X] \$9,999,99 \$9,999,99 \$9,999,99 \$
2 1 2 3	2.6 Reserve Ratio (2.4/2.5) Has the reporting entity received any endowment or gift from contracting hospitals, returned when, as and if the earnings of the reporting entity permits? If yes, give particulars: Have copies of all agreements stating the period and nature of hospitals', physicial dependents been filed with the appropriate regulatory agency? If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these Does the reporting entity have stop-loss reinsurance? If no, explain: The Company retains all risk. Maximum retained risk (see instructions) Describe arrangement which the reporting entity may have to protect subscribers a hold harmless provisions, conversion privileges with other carriers, agreements wi agreements: Reserves exceed all regulatory requirements. Member of lowa Life & Health Insur	1.000 1.000 physicians, dentists, or others that is agreed will be ns', and dentists' care offered to subscribers and agreements include additional benefits offered? 5.31 Comprehensive Medical 5.32 Medical Only 5.33 Medicare Supplement 5.34 Dental & Vision 5.35 Other Limited Benefit Plan 5.36 Other nd their dependents against the risk of insolvency including h providers to continue rendering services, and any other ance Guaranty Association under Iowa Code 508C. date basis?	Yes [X] No [] Yes [X] No [] Yes [] No [X] \$9,999,99 \$9,999,99 \$9,999,99 \$
2 1 2 1 2 3	2.6 Reserve Ratio (2.4/2.5)	1.000 1.000 physicians, dentists, or others that is agreed will be ns', and dentists' care offered to subscribers and agreements include additional benefits offered? 5.31 Comprehensive Medical 5.32 Medical Only 5.33 Medicare Supplement 5.34 Dental & Vision 5.35 Other Limited Benefit Plan 5.36 Other nd their dependents against the risk of insolvency including h providers to continue rendering services, and any other ance Guaranty Association under Iowa Code 508C. date basis? 8.1 Number of providers at start of reporting year .	Yes [X] No [] Yes [X] No [] Yes [] No [X] \$
2 1 2 3 1 2 2	2.6 Reserve Ratio (2.4/2.5) Has the reporting entity received any endowment or gift from contracting hospitals, returned when, as and if the earnings of the reporting entity permits? If yes, give particulars: Have copies of all agreements stating the period and nature of hospitals', physicial dependents been filed with the appropriate regulatory agency? If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these Does the reporting entity have stop-loss reinsurance? If no, explain: The Company retains all risk. Maximum retained risk (see instructions) Describe arrangement which the reporting entity may have to protect subscribers a hold harmless provisions, conversion privileges with other carriers, agreements wi agreements: Reserves exceed all regulatory requirements. Member of lowa Life & Health Insur Does the reporting entity set up its claim liability for provider services on a service if no, give details	1.000 1.000 physicians, dentists, or others that is agreed will be ns', and dentists' care offered to subscribers and agreements include additional benefits offered? 5.31 Comprehensive Medical 5.32 Medical Only 5.33 Medicare Supplement 5.34 Dental & Vision 5.35 Other Limited Benefit Plan 5.36 Other nd their dependents against the risk of insolvency including h providers to continue rendering services, and any other ance Guaranty Association under Iowa Code 508C. date basis?	Yes [X] No [] Yes [X] No [] Yes [] No [X] \$9,999,99 \$9,99,99 \$
2 1 2 3 1 2 3 1 2 .	2.6 Reserve Ratio (2.4/2.5) Has the reporting entity received any endowment or gift from contracting hospitals, returned when, as and if the earnings of the reporting entity permits? If yes, give particulars: Have copies of all agreements stating the period and nature of hospitals', physicial dependents been filed with the appropriate regulatory agency? If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these Does the reporting entity have stop-loss reinsurance? If no, explain: The Company retains all risk. Maximum retained risk (see instructions) Describe arrangement which the reporting entity may have to protect subscribers a hold harmless provisions, conversion privileges with other carriers, agreements wi agreements: Reserves exceed all regulatory requirements. Member of lowa LIfe & Health Insur Does the reporting entity set up its claim liability for provider services on a service If no, give details Provide the following information regarding participating providers:	1.000 1.000 physicians, dentists, or others that is agreed will be ns', and dentists' care offered to subscribers and agreements include additional benefits offered? 5.31 Comprehensive Medical 5.32 Medical Only 5.33 Medicare Supplement 5.34 Dental & Vision 5.35 Other Limited Benefit Plan 5.36 Other nd their dependents against the risk of insolvency including h providers to continue rendering services, and any other ance Guaranty Association under Iowa Code 508C. date basis? 8.1 Number of providers at start of reporting year . 8.2 Number of providers at end of reporting year .	Yes [X] No [] Yes [X] No [] Yes [] No [X] \$
2 1 2 3 1 2	2.6 Reserve Ratio (2.4/2.5) Has the reporting entity received any endowment or gift from contracting hospitals, returned when, as and if the earnings of the reporting entity permits? If yes, give particulars: Have copies of all agreements stating the period and nature of hospitals', physicial dependents been filed with the appropriate regulatory agency? If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these Does the reporting entity have stop-loss reinsurance? If no, explain: The Company retains all risk. Maximum retained risk (see instructions) Describe arrangement which the reporting entity may have to protect subscribers a hold harmless provisions, conversion privileges with other carriers, agreements wi agreements: Reserves exceed all regulatory requirements. Member of lowa Life & Health Insur Does the reporting entity set up its claim liability for provider services on a service if no, give details	1.000 1.000 physicians, dentists, or others that is agreed will be ns', and dentists' care offered to subscribers and agreements include additional benefits offered? 5.31 Comprehensive Medical 5.32 Medical Only 5.33 Medicare Supplement 5.34 Dental & Vision 5.35 Other Limited Benefit Plan 5.36 Other nd their dependents against the risk of insolvency including h providers to continue rendering services, and any other ance Guaranty Association under Iowa Code 508C. date basis? 8.1 Number of providers at start of reporting year . 8.2 Number of providers at end of reporting year .	Yes [X] No [] Yes [X] No [] Yes [] No [X] \$
2 1 2 1 2 3	2.6 Reserve Ratio (2.4/2.5) Has the reporting entity received any endowment or gift from contracting hospitals, returned when, as and if the earnings of the reporting entity permits? If yes, give particulars: Have copies of all agreements stating the period and nature of hospitals', physicial dependents been filed with the appropriate regulatory agency? If not previously filed, furnish herewith a copy(ies) of such agreement(s). Do these Does the reporting entity have stop-loss reinsurance? If no, explain: The Company retains all risk. Maximum retained risk (see instructions) Describe arrangement which the reporting entity may have to protect subscribers a hold harmless provisions, conversion privileges with other carriers, agreements wi agreements: Reserves exceed all regulatory requirements. Member of lowa LIfe & Health Insur Does the reporting entity set up its claim liability for provider services on a service If no, give details Provide the following information regarding participating providers:	1.000 1.000 physicians, dentists, or others that is agreed will be ns', and dentists' care offered to subscribers and agreements include additional benefits offered? 5.31 Comprehensive Medical 5.32 Medical Only 5.33 Medicare Supplement 5.34 Dental & Vision 5.35 Other Limited Benefit Plan 5.36 Other nd their dependents against the risk of insolvency including h providers to continue rendering services, and any other ance Guaranty Association under Iowa Code 508C. date basis? 8.1 Number of providers at start of reporting year . 8.2 Number of providers at end of reporting year .	Yes [X] No [] Yes [X] No [] Yes [] No [X] \$

GENERAL INTERROGATORIES

10.1	Does the reporting entity have Incentive Pool, Withh	old or Bonus Ar	rangements in its p	rovider contracts?			Yes [X]	No []
10.2	If yes:		10 10	.22 Amount actua .23 Maximum am	illy paid for year bo ount payable withh	ses nuses olds thholds	\$	42,358,311
11.111.211.311.4	Is the reporting entity organized as: Is the reporting entity subject to Statutory Minimum (If yes, show the name of the state requiring such min If yes, show the amount required.	nimum capital ar	nd surplus.	11.13 An Individ 11.14 A Mixed		ciation (IPA), or, . n of above)?	Yes [] Yes [] Yes [X]] No [X]] No [X]] No [X] No [] <u>Iowa</u> 5,000,000
11.5 11.6	Is this amount included as part of a contingency rese If the amount is calculated, show the calculation						Yes []	No [X]
12.	South Dał		1 Name of Service					
13.1	Do you act as a custodian for health savings accoun							
13.2 13.3 13.4	If yes, please provide the amount of custodial funds Do you act as an administrator for health savings ac	counts?					Yes []	No [X]
14.1] N/A [X]
	1	2	3	4	Assets	Supporting Reserve	e Credit	
	Company Name	NAIC Company Code	Domiciliary Jurisdiction	Reserve Credit	5 Letters of Credit	6 Trust Agreements	7 Other	
								······
15.	Provide the following for individual ordinary life insur ceded):	ance* policies (l	J.S. business only)	15.1 E 15.2 T	Direct Premium Wri Total Incurred Clain	itten	\$	
	Term(whether full und Whole Life (whether f Variable Life (with or Universal Life (with or Variable Universal Lif	lerwriting, limited ull underwriting, without seconda without second e (with or withou	limited underwritin, ry gurarantee) ary gurarantee) it secondary gurara	Includes ssue, "short form a g, jet issue, "short ntee)	app") form app")	Lives		
16.	Is the reporting entity licensed or chartered, registered	ed, qualified, elig	ible or writing busi	ness in at least tw	o states?		Yes [X] No	o[]

FIVE-YEAR	HISTORICAL	DATA
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		1 2021	2 2020	3 2019	4 2018	5 2017
	Balance Sheet (Pages 2 and 3)					
1.	Total admitted assets (Page 2, Line 28)					
2.	Total liabilities (Page 3, Line 24)					
3.	Statutory minimum capital and surplus requirement					
4.	Total capital and surplus (Page 3, Line 33)					
	Income Statement (Page 4)					
5.	Total revenues (Line 8)	2.551.895.501	2.534.234.453	2.560.232.134	2.625.888.455	2.646.943.30
6.	Total medical and hospital expenses (Line 18)					
7.	Claims adjustment expenses (Line 20)					
8.	Total administrative expenses (Line 21)					
9.	Net underwriting gain (loss) (Line 24)					
10.	Net investment gain (loss) (Line 27)					
10.	Total other income (Lines 28 plus 29)					
12.	Net income or (loss) (Line 32)					
12.	Cash Flow (Page 6)					
12	Net cash from operations (Line 11)	76 524 564	21 942 504	75 420 966	11 006 851	46 705 07
13.	Risk-Based Capital Analysis		21,942,504			40,703,077
	Total adjusted capital	0 017 770 500	0.005.004.040	1 952 666 062	1 567 202 002	1 504 110 46
14.	Authorized control level risk-based capital					
15.			180,444,825	165,681,780		147, 166,56
	Enrollment (Exhibit 1)	1 150 070	1 100 050	1 010 004	1 000 700	
16.	Total members at end of period (Column 5, Line 7)					
17.	Total members months (Column 6, Line 7)		14,324,116	14,689,144		
	Operating Percentage (Page 4) (Item divided by Page 4, sum of Lines 2, 3 and 5) x 100.0					
18.	Premiums earned plus risk revenue (Line 2 plus Lines 3 and 5)					
19.	Total hospital and medical plus other non-health (Lines 18 plus Line 19)					
20.			0.8	0.8	0.7	0.8
21.	Other claims adjustment expenses		3.1	3.1		2.9
22.	Total underwriting deductions (Line 23)					
23.	Total underwriting gain (loss) (Line 24)					
20.	Unpaid Claims Analysis (U&I Exhibit, Part 2B)					
24.	Total claims incurred for prior years (Line 13, Col. 5)					
25.	Estimated liability of unpaid claims-[prior year (Line 13, Col. 6)]	254,009,736				
	Investments In Parent, Subsidiaries and Affiliates					
26.	Affiliated bonds (Sch. D Summary, Line 12, Col. 1)		0	0	0	
27.	Affiliated preferred stocks (Sch. D Summary, Line 18, Col. 1)	0	0	0	0	(
28.	Affiliated common stocks (Sch. D Summary, Line 24, Col. 1)	606,738,262				
29.	Affiliated short-term investments (subtotal included in Schedule DA Verification, Col. 5, Line 10)	0	0	0	0	
30.	Affiliated mortgage loans on real estate					
31.	All other affiliated					
32.	Total of above Lines 26 to 31	606,738,262				
33.	Total investment in parent included in Lines 26 to					

SCHEDULE T PREMIUMS AND OTHER CONSIDERATIONS

Allocated by States and Territories 2 3 4 5 6 8 9 10 Federal Employees Life and Annuity Active Accident and Benefits Premiums & Property/ Casualty Total Program Premiums Columns 2 Through 8 Status Health Medicare Medicaid CHIP Title Other Deposit-Type States, etc. Premiums Title XVIII Title XIX Premiums Contracts (a) XXI sideratio 1 Alabama AI Ν 0 0 2. Alaska AK Ν 0 0 3. 0 Arizona ΑZ Ν 0 4. Arkansas AR 0 0 N 5. California CA .0 0. N 6. Colorado со 0 0 Ν 7. Connecticut СТ .0 0. N 8. Delaware DE N 0 0 9. District of Columbia . DC Ν 0 0 0 10. Florida FL Ν. .0 0 11. Georgia GA N .0 12. Hawaii .0 0. HI ..N. 13. Idaho ID ..N. .0 .0 14. Illinois .0 0 IL N 15 Indiana IN ..N. ٥ 0 2.204.772.163 290.870.181 2.495.642.344 16. lowa IA L 0 0 17. Kansas ĸs Ν 0 18. Kentucky KΥ N .0 .0 19. Louisiana .0 0 LA N 20. Maine ME .0 ..N .0 21. Maryland MD Ν 0 0 22 Massachusetts MA Ν 0 0 23 Michigan MI Ν 0 0 24. Minnesota 0 MN Ν 0 Mississippi 25. MS .Ν. ..0 .0 26. Missouri МО 0 0 Ν 27. Montana .0 MT N .0 28. Nebraska NE .0 0. N 29. Nevada NV N 0 0 30. New Hampshire NH Ν 0 0 New Jersey 0 31. NJ N 0 New Mexico 32. .0 .0 NM .Ν. 33. New York NY .0 0. .N. 34. North Carolina .0 .0 NC N 35. North Dakota ND .0 0. N 36 Ohio ОН Ν 0 0 37. Oklahoma OK Ν 0 0 38. Oregon. OR Ν 0 0 39. Pennsylvania PA .0 .0 Ν. 40. Rhode Island RI .0 0. ..N. South Carolina 41. 0 SC .N. 0 42. South Dakota SD .57,863,560 .57,863,560 0. L Tennessee 43 ΤN N 0 0 44. Texas ΤХ Ν 0 0 45. Utah. UT Ν. .0 0 46. Vermont VT .0 0 N 47. Virginia. .0 0. VA ..N. 48. Washington WA ..N. .0 .0 49. West Virginia WV N .0 0 50 Wisconsin \//I Ν. ٥ 0 51. Wyoming WY Ν 0 0 52. American Samoa... 0 AS Ν 0 53. Guam GU .0 N ..0 54. Puerto Rico .. .0 .0 PR N 55. U.S. Virgin Islands VI ..N .0 .0 56. Northern Mariana 0 Islands ... MP N 0 57. Canada ..0 .0 CAN N. 58. Aggregate Other OT XXX. 0 .0 .0 .0 .0 .0 0 0 .0 Aliens 59. Subtotal XXX 2,262,635,723 ..0 .0 .0 . 290, 870, 181 .0 .0 2,553,505,904 .0 Reporting Entity Contributions for Employee 60 XXX .0 **Benefit Plans** .0 Totals (Direct Business) 2,262,635,723 0 0 0 290,870,181 0 0 2,553,505,904 61 0 XXX DETAILS OF WRITE-INS 58001. ххх 58002. XXX 58003 XXX Summary of remaining write-ins for Line 58 from 58998 overflow page Totals (Lines 58001 through 58003 plus 58998)(Line 58 0 .0 ..0 .0 .0 .0 .0 0 XXX. .0 58999. XXX 0 0 0 0 0 0 above) 0 0

(a) Active Status Counts:

L - Licensed or Chartered - Licensed insurance carrier or domiciled RRG E - Eligible - Reporting entities eligible or approved to write surplus lines in the state.

0 R - Registered - Non-domiciled RRGs.

N - None of the above - Not allowed to write business in the state...

Q - Qualified - Qualified or accredited reinsurer. 0

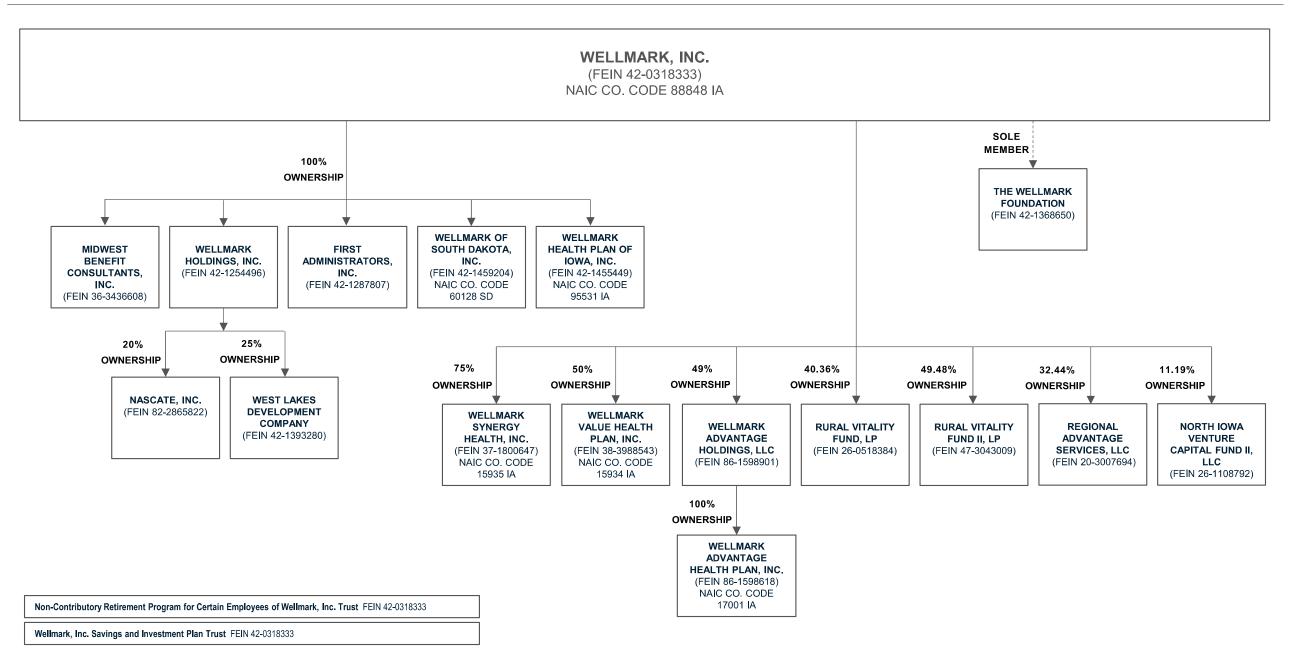
(b) Explanation of basis of allocation by states, premiums by state, etc. Accident and Health premiums are allocated according to the location of the group or individual purchaser at the point of issue.

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SCHEDULE Y – INFORMATION CONCERNING ACTIVITIES OF INSURER MEMBERS OF A HOLDING COMPANY GROUP PART 1 – ORGANIZATIONAL CHART



ANNUAL STATEMENT FOR THE YEAR 2021 OF THE Wellmark, Inc. **OVERFLOW PAGE FOR WRITE-INS**

al Write-ins for Assets Line 25				
		Current Year		
	1	2	3	4
			Net Admitted Assets	Net Admitted
	Assets	Nonadmitted Assets	(Cols. 1 - 2)	Assets
Miscellaneous Assets		1,620,521		
Summary of remaining write-ins for Line 25 from overflow page	2,143,507	1,620,521	522,986	552,941
	Miscellaneous Assets	1 Assets Miscellaneous Assets	Current Year 1 2 Assets Nonadmitted Assets Miscellaneous Assets	Current Year 1 2 3 Assets Nonadmitted Assets (Cols. 1 - 2) Miscellaneous Assets

Additior	nal Write-ins for Exhibit of Nonadmitted Assets Line 25			
		1	2	3
				Change in Total
		Current Year Total	Prior Year Total	Nonadmitted Assets
		Nonadmitted Assets	Nonadmitted Assets	(Col. 2 - Col. 1)
2504.	Miscellaneous Assets	1,620,521	1,717,833	
2597.	Summary of remaining write-ins for Line 25 from overflow page	1,620,521	1,717,833	97,312